

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000000667

FILED
Oct 18, 2006
Secretary of State

Entity Name: AYOKAGIFTS INTERNATIONAL AFRICAN CULTURAL CENTER INC.

Current Principal Place of Business:

19024 NE 21ST ST.
GAINESVILLE, FL 32609

New Principal Place of Business:

18972 NE 21ST ST.
GAINESVILLE, FL 32609

Current Mailing Address:

19024 NE 21ST ST.
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 06-1704601 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAISY C. JASEY
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

JASEY, DAISY C
19024 NE 21 STREET
GAINESVILLE, FL 32609 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAISY C. JASEY

10/18/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: JASEY, DAISY C
Address: 19024 NE 21 STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: SEC. () Delete
Name: LEWIS-KHUFIA, CANDACE
Address: P.O. BOX 6779
City-St-Zip: OCALA, FL 34478

Title: TREA () Delete
Name: HENRY, TERRY L
Address: 3721 SE 17TH AVENUE
City-St-Zip: GAINESVILLE, FL 32641

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAISY C. JASEY

PRES

10/18/2006

Electronic Signature of Signing Officer or Director

Date