

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N29476

1. Corporation Name Royal Assembly Kingdom of Elohim

FILED

99 SEP 27 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
8267 NE 2nd Ave
Miami, FL, 33138

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

12/12/1988

5. FEI Number

65-0892455

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
Director (D)	Pastor Irving Keith Barbary	145 NW 206 Terr.	Miami, FL 33169
President			
Director (D)	Tonia Barbary	145 NW 206 Terr.	Miami, FL 33169
Secretary			
Director (D)	Juanita France	2080 Sherman Ctr. N. Apt 205	Miami, FL 33025
Treasurer			
Chairman	Marcus France	6070 NW 194th Terr.	Miami, FL 33015
(Trustee)			
Assistant	Clayton Anthony Harris	140 NW 206 Terr.	Miami, FL 33169
Chairman			
(Trustee)			

8. Name and Address of Current Registered Agent

Pastor Irving Keith Barbary
145 NW 206 Terr.
Miami, FL 33169

REINSTATEMENT 98-99 : TTS

Street Address (P.O. Box Number is Not Acceptable)

800003007178--3

Suite, Apt. #, Etc.

-10/06/99--01012--006

City

****306.25

State

Zip Code

FL

306.25

10. I being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Irving K. Barbary
REGISTERED AGENT MUST SIGN

Date 09-18-99

11. This corporation owes the current year Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information on intangible tax)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Irving K. Barbary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-18-99

Date

Daytime Phone #

CR2E081 (12/98)