2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#724684

FILED Oct 03, 2005 Secretary of State

Entity Name: BETHEL FULL GOSPEL BAPTIST CHURCH, INC. **Current Principal Place of Business: New Principal Place of Business:** 14440 LINCOLN BOULEVARD MIAMI, FL 33176 **Current Mailing Address: New Mailing Address:** 14440 LINCOLN BOULEVARD MIAMI, FL 33176 FEI Number: 59-2394117 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: Name and Address of New Registered Agent: GARNETT, ROBERT 12634 SW 211 TERRACE MIAMI, FL 33177 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: ROBERT GARNETT Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MALONE, BISHOP CARLOS E ST. Name: Name: Address: 8241 SW 183 STREET Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MARTIN, GARY Name: Address: 14440 LINCOLN BLVD Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: () Change () Addition GARNETT, ROBERT Name: Name: 12634 SW 211 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33176 US City-St-Zip: Title: SECR () Delete Title: () Change () Addition MALONE, EARLENE Name: Name: Address: 8241 SW 183RD STREET Address: City-St-Zip: MIAMI, FL 33157 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT GARNETT T 10/03/2005