

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 DEC -9 AM 10:23

SECRETARY OF STATE
TALLAHASSEE, FL 32304

DOCUMENT # 742616

1. Corporation Name

OLIVE TREE MINISTRIES, INC.

2. Principal Office Address

655 Ives Diary Rd

Suite, Apt. #, etc.

420

City & State

Miami, FL

Zip

33179

Country

Miami-Dade

3. Mailing Office Address

655 Ives Diary Rd

Suite, Apt. #, etc.

420

City & State

Miami, FL

Zip

33179

Country

Miami-Dade

REINSTATEMENT 02

4. Date Incorporated or Qualified
To Do Business in Florida

5/1/78

5. FEI Number

59-1831676

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Allen B Kurzweil

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

655 Ives Diary Rd

Suite, Apt. #, Etc.

420

City

Miami

State
FL

Zip Code

33179

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Allen B. Kurzweil

REGISTERED AGENT MUST SIGN

Date

12/6/02

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Allen B. Kurzweil	655 Ives Diary Rd #420	Miami, FL 33179
VD	Susan (Shoshana) Kurzweil	655 Ives Diary Rd #420	Miami, FL 33179
D	John Breward	11 NW 117th St	Miami, FL 33160

10. 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:

Allen B. Kurzweil

Allen B. Kurzweil

Date

12/6/02 (305)653-0215

Daytime Phone #

CR2E081 (9/01)