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Jun 27, 2002 8:00 A
Secretary of State

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

CORPORATION
REINSTATEMENT



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

DOCUMENT # 770968
1. Corporation Name
JESUS CHRIST CHURCH FOR ALL PEOPLE, INC.

2. Principal Office Address
720 NW 4th STREET

3. Mailing Office Address
720 NW 4th STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
FT. LAUDERDALE FL

City & State
FT. LAUDERDALE FL

Zip
33311

Country
US

Zip
33311

Country
US

4. Date Incorporated or Qualified
To Do Business in Florida 1993
5. FEI Number
65-0729510
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
ELNORA SMITH

Street Address (P.O. Box Number is Not Acceptable)
6 NE 16 COURT

Suite, Apt. #, Etc.

City
FT. LAUDERDALE

State
FL

Zip Code
33311

900006263759-1
07/08/02-01196-005
****122.50 *****61.25

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 Elnora Smith
Date 5/31/02
REGISTERED AGENT MUST SIGN

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
D	HENRY ELDER SMITH	3716 SW 16th STREET	FT. LAUDERDALE FL 33311
SD	EARLENE WRIGHT	3716 SW 16th STREET	FT. LAUDERDALE FL 33311
D	VERT ALLEN	1101 NW 45th AVENUE	FT. LAUDERDALE FL 33311

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: Rev Henry Smith
REVEREND HENRY SMITH
Date 5/31/2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date
Daytime Phone #

CR2E081 (8/01)