

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 AUG 13 AM 8:00

DOCUMENT # N 00000000701

1. Corporation Name

HARMONY of THE DIVINE LIGHT CENTER

2. Principal Office Address

1629 S. 21st AVE
HOLLYWOOD, FL 33020

Suite, Apt. #, etc.

City & State

HOLLYWOOD, FL 33020

Zip

33020

Country

BROWARD

3. Mailing Office Address

1629 S. 21st AVE

Suite, Apt. #, etc.

City & State

HOLLYWOOD, FL

Zip

33020

Country

BROWARD

500022289765
08/13/03--01064--002 **122.50

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

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

REV. VANICK F. CASTOR

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

10352 SW 9th LANE

Suite, Apt. #, Etc.

City

PENBROKE PINES

State

FL

Zip Code

33025

REINSTATEMENT 02-03

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

REV DR. [Signature]

Date

7/19/03

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
PRES.	Rev. VANICK F. CASTOR	10352 SW 9 th LANE. PB.	PENBROKE PINES, FL 33025
Treas.	RAYMOND FONTAINE	946 SW 102 TERRACE	PENBROKE PINES, FL 33025
Sec.	KARLYN FONTAINE	946 SW 102 TERRACE	PENBROKE PINES, FL 33025
Dir.	LUCY FONTAINE	10352 SW 9 th LANE	PENBROKE PINES, FL 33025
	4 th Carl Constant	401 SW 9 th Avenue	MARGATE, FL 33068
Dir.	Andrie Auguste	2904 CRESCENT PLACE	MIRAMAR, FL 33025

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(2)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

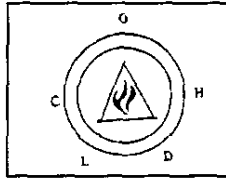
Date

Daytime Phone #

7/19/03

(754) 204-0580
(954) 818-9165

CR2E081 (10/02)



Harmony of the Divine Light
1629 SW 21st Ave.
Hollywood, FL 33020
(954) 457-0446

August 4, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
Attn: Anna Chestnut

Incorporation Renewal

Dear Madame

During a phone call to your organization requesting an incorporation renewal form, I was informed that the incorporation for Harmony of the Divine Light (HDL) is suspended. The suspension was due to non-payment. Due to change of HDL address, I never received a renewal form allowing HDL to continue its incorporation. Per your record, the 2001²⁰⁰² annual report was returned to your office. I am requesting that the \$175.00 penalty be waved.

Attached are a check of \$122.50 and the renewal application.

Sincerely,

Rev. Yanick F Castor