

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000002848

FILED
Mar 20, 2006
Secretary of State

Entity Name: PANORAMA FAMILY CHURCH INTERNATIONAL, INC.

Current Principal Place of Business:

9630 NW 2ND STREET
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

PO BOX 1914
MIAMI, FL 33055

New Mailing Address:

FEI Number: 65-1006384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMALL, CARLTON
9630 NW 2ND ST
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

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: CARLTON SMALL

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMALL, CARLTON
Address: 9630 NW 2ND ST
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D () Delete
Name: CHAMBERS, JOHN
Address: 3692 THOMAS AVE
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: HUNT, YOLANDA
Address: 755 NW 175TH STREET
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CARLTON SMALL

MR

03/20/2006

Electronic Signature of Signing Officer or Director

Date