2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0000003886

City-St-Zip:

FILED Nov 21, 2006 Secretary of State

Entity Name: THE NEW BEGINNING COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business: New Principal Place of Business: 13850 NW 26TH AVE OPA-LOCKA, FL 33054 **Current Mailing Address: New Mailing Address:** 13850 NW 26TH AVE OPA-LOCKA, FL 33054 FEI Number: 65-1020777 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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: SMITH, CHERYL 14900 NW 6TH COURT MIAMI, FL 33168 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: RA Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SMITH, CHERYL ELEANOR, MAY Name: Name: 14900 NW 6TH COURT Address: 14900 NW 6TH COURT Address: City-St-Zip: MIAMI, FL 33168 City-St-Zip: MIAMI, FL 33168 Title: VPD () Delete Title: VPD (X) Change () Addition Name: DONALD, SHARON Name: GWEN, SMITH Address: 13850 NW 26TH AVE Address: 13850 NW 26TH AVE City-St-Zip: OPA-LOCKA, FL 33054 City-St-Zip: OPA-LOCKA, FL 33054 Title: () Delete Title: () Change () Addition FREEMAN, MICHAEL Name: Name: 13850 NW 26TH AVE Address: Address: City-St-Zip: OPA LOCKA, FL 33054 City-St-Zip: Title: TD (X) Delete Title: () Change () Addition Name: SMITH, CHERYL Name: 14900 NW 6TH COURT Address: Address: MIAMI, FL 33168

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.

City-St-Zip:

SIGNATURE: EM PDT 11/21/2006