2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000001212

FILED Sep 24, 2006 Secretary of State

Entity Name: INTERNATIONAL HOUSES OF PRAYER, INC.							
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:			
18033 SW MIAMI, FL	142 COURT 33177						
Current Mailing Address:			New Mailii	New Mailing Address:			
18033 SW MIAMI, FL	142 COURT 33177						
FEI Number	: 74-3049188	FEI Number Applied For()	FEI Number Not Appli	cable ()	Certificate of Status Des	sired (X)	
Name and	Address of C	urrent Registered Agent:	Name and	Address of N	lew Registered Agen	t:	
PAINE, ED 18033 SW MIAMI, FL	142 COURT						
	named entity s e of Florida.	submits this statement for the p	ourpose of changing it	s registered o	ffice or registered age	nt, or both,	
SIGNATU	RE: EDWARD	PAINE					
	Electron	ic Signature of Registered Age	ent		Date		
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANGES	TO OFFICERS AND I	DIRECTORS	
Title: Name: Address: City-St-Zip:	DCEO () JUPIA, WIRAT 18033 SW 142 MIAMI, FL 331	COURT	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	DST () JUPIA, SUPIT 18033 SW 142 MIAMI, FL 331		Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	D () FELDER, ROBE 15806 SW 97 A MIAMI, FL 331	VE	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	D () PAINE, EDWAR 18033 SW 142 MIAMI, FL 331	COURT	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name:	CFO () REYES. PAT	Delete	Title: Name:	CFO (X) WILLIAMS, PAT	Change () Addition		

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.

Address:

City-St-Zip:

13821 SW 136TH PLACE

MIAMI, FL 33186

SIGNATURE: EDWARD PAINE 09/24/2006 D

13821 SW 136TH PLACE

MIAMI, FL 33186

Address:

City-St-Zip: