PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PLEAS	SE READ A	LL IIA9 I	RUCTIONS E	SEI OILE O	OIVII LL I II	10 1110 1 01	•	
	LICATION FOR		3	DEPARTMENT Jim Smith Secretary of Sta	ıte	0.0	FILED		
HEINS	STATEMENT	U	<u> </u>	ISION OF CORPORA	TIONS	US	FEB -4 AMII:	31	
DOCUMENT # NO100002963 Corporation Name REEDOM INTERNATIONAL MINISTRIES, INC.						SECRETAGY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business Mailing Ad				ess		`		RAFIN II NIN GALEN HUIRR KIR KAR	
4 642-Brady Lane Palm-Beach Gardens -Fl-33418			4 642 Brady Lane - Palm Beach Gardens fl 99418						
		بالمساه ليدلي	Service missesses	entrante de la companya della companya de la companya de la companya della compan			the second se		
If above ac	dresses are incorrect in	n any way, line thro	ugh incorrect in	ormation and enter correction below.			porated or Qualified		
2480 LAKE OSBOCNE DC 24				OU AINE USEDITUE DI			Date Incorporated or Qualified To Do Business in Florida 04/25/2001		
Suite, Apt. # etc. Suite, Apt. # 208 A			Suite, Apt. #, etc. Apt 308A City & State			5. FEI Number	119540	Applied For Not Applicable	
LAKE WORTH, FI LAKE Zip 33461 Palm Beach 334				WORTH, Country	Beach	6.		8.75 Additional Fee required for a Certificate of Status	
7. Names a	and Street Addresses of	Each Officer and/o				ast 3 directors)			
Title(s)	Name of Officers			Street Address of Each Officer and/or Director			City / State / Zip		
PD BUTERA, KAREN A			4642 BRADY LANE			PALM BEACH GARDENS FL 33418			
VD JACKSON, NERISSA E			1101 CHORUS WAY			ROYAL PALM BEACH FL 33411			
STD SMITH, FRANZISKA				6140 BARBARA ST.			JUPITER FL 33458		
						60 02/04/	0011785: 0301065006	366 ** ¹³¹ .25	
 .					· · · · · · · · · · · · · · · · · · ·			-	
8. Name and Address of Current Registered Agent						9. Name and Address of New Registered Agent			
BUTERA, KAREN A						Gress Change ONLY			
Street Address 2.480					(P.O. Box Number is Not Acceptable) LAKE OS BOCNE DC.				
10.12 11.2					Suite, Apt. #, Et				
				City LAVE WOOD			TH S	ate Zip Code	
10. I, being	g appointed the register	red agent of the abo	ve named corp	poration, am familiar wi	ith and accept the	obligations of Sec	tion 607.0505, F.S. or 617.0		
Signature o		Hard		BULLUI GENT MIST SIGN	MRED		Date _//29/	63	

11. 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:

SIGNATURE BUTCHERED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/39/03
Daty Daytime Phone #

FREEDOM INTERNATIONAL MINISTRIES

2480 Lake Osborne Drive, #208 Lake Worth, FL 33461 Phone: (561) 386-8776

January_10, 2003

Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL 32314-6327

To Whom it May Concern:

This letter is to inform you that I, Karen A. Butera, President and Registered Agent of Freedom International Ministries, Inc., moved my residence and office address (my new address is listed above). For this reason, I did not receive forms for 2002.

The Corporation office address also changed, however I did receive reinstatement forms due to being hand delivered by my previous landlord.

For this reason, I understand the reinstatement fee can be waived. I have enclosed \$61.25 for 2002 and 2003 plus \$8.75 for Certificate of Status.

Thank you for your attention to this matter.

Sincerely,

Karen A. Butera, President

Karen G. Buters

Freedom International Ministries

KAB/ld