

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

02 OCT 21 PM 12:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *NO1000006212*

1. Corporation Name

*MY FATHER'S HOUSE INTERNATIONAL
MINISTRIES, INC.*

2. Principal Office Address

515 Avenida Alegre

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip
33405

Country
U.S.A.

3. Mailing Office Address

515 Avenida Alegre

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip
33405

Country
U.S.A.

**4. Date Incorporated or Qualified
To Do Business in Florida**

8/12/2001

5. FEI Number

13-4215439

☒ 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

Christopher A. Jones

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

515 Avenida Alegre

Suite, Apt. #, Etc.

City

West Palm Beach

State
FL

Zip Code
33405

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

Christopher A. Jones, President

Date *10-14-02*

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
<i>P/C/D</i>	<i>Christopher A. Jones</i>	<i>515 Avenida Alegre</i>	<i>West Palm Beach, FL 33405</i>
<i>V/D</i>	<i>Noelle B. Jones</i>	<i>515 Avenida Alegre</i>	<i>West Palm Beach, FL 33405</i>
<i>T/D</i>	<i>Clementine Gbadia</i>	<i>515 Avenida Alegre</i>	<i>West Palm Beach, FL 33405</i>

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(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:

Christopher A. Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-14-02

Daytime Phone #

(561) 355-3226

CR2E081 (9/01)

10/22/02
69.25

My Father's House International Ministries, Inc.
515 Avenida Alegre
West Palm Beach, FL 33405

10-14-02

To whom it may concern,

My Father's House International Ministries, Inc. failed to file an annual report for 2002 because the location of the principal office had changed. We never received the request and forms for filing. Could the State of Florida please wave the penalty fee for reinstatement?

Herewith please find a Corporation Reinstatement Form and a check for \$61.25. Also herewith please find the "Not-For-Profit Corporation Uniform Business Report (URB). And a check for \$8.75 for a "Certificate of Status".

If you have any questions please call me at 561-355-3226 Monday through Friday from 7:00 A.M. to 3:30 P.M.

Thank you for your assistance in this matter,

A handwritten signature in cursive script, reading "Christ. A. Jones, President".

Christopher A. Jones
President

My Father's House International Ministries, Inc.