PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE CORPORATION 03 MAY 30 AM 9: 46 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # NO1000006677 1. Corporation Name TRULY BLESSED MISSIONARY BAPTIST CHURCH, INC. 2. Principal Office Address 3. Mailing Office Address 19201 EAST SAINT ANDREW 19201 EAST SAINT ANDREW Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified 09/20/2001 To Do Business in Florida City & State City & State 5. FEI Number Applied For HIALEAH, FL HIALEAH, FL 65-1140107 ✓ Not Applicable Zin Country Zip Country CERTIFICATE OF STATUS DESIRED ! 33015 DADE 33015 DADE 7. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 05/30/03-+01004--010 **13 00. 1840 S.W. 22ND STREET Suite, Apt, #, Etc. 4TH FLOOR Zip Code State **IMAIM** 33145 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 04/03/03 Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Titles City / State / Zip Officer and/or Director PTD REV. WILLIAM M. CLARK, JR. 19201 EAST SAINT ANDREWS DR. HIALEAH, FL 33015 SVD GERALDINE CLARK 19201 EAST SAINT ANDREWS DR. HIALEAH, FL 33015

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:

Truly Blessed Missionary Baptist Church Rev. William M. Clark, Jr., Pastor/Teacher 19201 EAST SAINT ANDREWS DRIVE Hialeah, FL 33015

April 4, 2003

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

Dear Sirs:

Truly Blessed Missionary Baptist Church (TBMBC), location was moved July of 2002, from 2455 N.W. 169th Street, Opa-locka, Florida 33056-4557 to 19201 East Saint Andrews Drive, Hialeah, Fl 33015, the new location. Due to (TBMBC) mail being forwarded to the old address, we did not receive the necessary correspondence from your office to meet the deadline date. Therefore, we contacted your office Wednesday, April 2, 2003, and was directed to submit the enclosed money order for \$122.50 for the Annual Report Fee plus 8.95 for the cost of the certificate of status. If we have incurred additional fees, we are asking for a waiver, thanking you in advance for your support and cooperation.

Please call, Rev. William M. Clark, Jr. and/or Ms. Geraldine Clark, Secretary of TBMBC, if you have any questions and/or concerns, (305) 525-7828 and/or (305) 829 – 4903

Sincerely,

ey. William M. Clark, Jr.

Ms. Geraldine Clark

ALL APPLICATIONS NOT COMPLETED IN ACCORDANCE WITH THESE INSTRUCTIONS WILL BE RETURNED FOR CORRECTION(S). PLEASE READ ALL INSTRUCTIONS CAREFULLY.

INSTRUCTIONS FOR COMPLETING THE REINSTATEMENT APPLICATION

- Block 1 Enter the corporation name & document number on file with the Secretary of State in Block 1. The NAME of the corporation can be changed only by filing an amendment.
- Block 2 Type or print principal office address in Block 2.
- Block 3 Type or print the mailing address in Block 3. (NOTE: Annual reports will be mailed to the last known mailing address. Reports are not mailed to the registered office address.)
- Block 4 Enter the date of incorporation or qualification for this corporation.
- Block 5 Complete Block 5 by entering your Federal Employer Identification (FEI) number or checking off the appropriate box. If "applied for" was previously reported to this office, you MUST now include the FEI number or attach a photocopy of your application for the FEI number to this form or this application will be rejected, Call Internal Revenue Service at 1-800-829-1040 for FEI assistance.
- Block 6 Your cancelled check will be your filing acknowledgment unless a certificate of status is requested in Block 6 and an additional \$8.75 is submitted to cover its fee. Certificates of status will be mailed to the corporate mailing address unless accompanied by a cover letter indicating the name and address to whom the certificate should be mailed.
- Enter name of the registered agent and/or address. (The registered office address must be a Florida street address.) Block 7
- The designated registered agent must indicate familiarity with Section 607.0505, F.S., or 617.0503, F.S., and acceptance of its Block 8 obligations and this appointment by completing and signing in Block 8. ALL REINSTATEMENTS MUST BE SIGNED BY THE REGISTERED AGENT in accordance with Section 607.1422(1)(b) or 617.1422(1)(b), F.S. If the registered agent does not sign, the application will be rejected.
- Block 9 Type or print the current officers/directors in the space provided in Block 9. Attach a separate sheet if necessary. In column 1 use the following or similar letters to designate appropriate corporate title(s): P=President, T=Treasurer, S=Secretary, V=Vice President, D=Director, C=Chairman, M=Manager, etc. If a person holds more than one position, enter all positions, e.g. S/D, V/D, P/V/D. A FLORIDA NONPROFIT CORPORATION MUST LIST ALL DIRECTORS (OR PERSON ACTING IN SUCH CAPACITY) THE NUMBER OF WHICH MAY NOT BE LESS THAN THREE (3) DIRECTORS OR TRUSTEES WITH THEIR STREET ADDRESSES. The letter "D" or "T" must appear beside the name and address of each director or trustee in the title portion. NOTE: A director must be a natural person 18 years of age or older. Florida Statutes requires a physical street address be given. The provision of a post office box in Block 9 is an affirmation under oath that no other address is available. If no officers/directors were previously given, they must now be designated.
- This report must be signed by an officer or a director of the corporation that is listed in Block 9 or on an attachment. If the corporation Block 10 is in the hands of a receiver, it must be signed by the trustee or receiver.

MAKE CHECKS PAYABLE TO DEPARTMENT OF STATE.

FEES:

Reinstatement Fee Annual Report Fee Corporate Supplemental Fee

(Profit Corporations only)

Minimum Amount Due

PROFIT CORPORATION

\$600.00

\$ 61.25 (for each year dissolved)

\$ 88.75 (for each year dissolved 1992 forward)

\$750.00

NON-PROFIT CORPORATION

\$175.00

\$ 61.25 (for each year dissolved)

236.25

Fees to Reinstate* Effective January 1, 2003

Tota to remotate Effective dulidary 1, 2005		
YEAR DISSOLVED	IF A PROFIT CORPORATION	IF A NON-PROFIT CORPORATION
1993	\$2,250.00	\$848.75
1 9 94	2,100.00	787.50
1995	1,950.00	726.25
1996	1,800.00	665.00
1997	1,650.00	603.75
1998	1,500.00	542.50
1999	1,350.00	481,25
2000	1,200.00	420.00
2001	1,050.00	358,75
2002	900.00	297.50
2003	750.00	236.25

^{*}If dissolved prior to 1993, call 850-245-6059 for filing fee information.

Mailing Address:

Department of State **Division of Corporations** P.O. Box 6327

Tallahassee, FL 32314

Courier Service Address:

Department of State **Division of Corporations** 409 East Gaines St. Tallahassee, FL 32399

internet Address:

http://www.sunbiz.org

(850) 245-6059

Hearing/Voice Impaired may call (850) 245-6096 (TDD)

^{*}Add additional \$8.75 for each certificate of status requested.