PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 18, 2003 8:00 A.M.
Secretary of State

DOCUMENT # N01000006861

1. Corporation Name: Faith Community Baptist Church, Inc.

800021295288
07/03/03--01018--004 **61.25

REINSTATEMENT 02-03

2. Principal Office Address	3. Mailing Office Address
10401 N. W. 8th Avenue	10401 N. W. 8th Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, Florida	City & State: Miami, Florida
Zip: 33167 Country: USA	Zip: 33167 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 9/27/2001

5. FEI Number: 65-1140802 ☐ 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: Ottolita Thompson

800021295288
07/03/03--01018--005 **24.00

Street Address (P.O. Box Number is Not Acceptable): 99 N. W. 183rd Street

Suite, Apt. #, Etc.: 240

City: Miami State: FL Zip Code: 33169

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: Ottolita Thompson
REGISTERED AGENT MUST SIGN

Date: 6/11/03

CR2E081 (10/02)

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
P	Rev. Lester L. Ward, Sr.	13421 S. W. 26th Street	Miramar, FL 33027
D	Ralph Pressley, Sr.	1367 N. W. 95th Terrace	Miami, FL 33147
D	Rev. Ricardo Peters	1940 N. W. 153rd Street	Opa- Locka, FL 33056
D	Steven J. Hayes	1350 N. W. 111th Street	Miami, FL 33167
D	Gary Thompson	661 N. E. 203rd Street	North Miami Bch, FL 33179
D	Sonny Marshall	940 Sharazad Blvd.	Opa-Locka, FL 33054

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: Rev. Lester L. Ward Sr. 6/11/03 305-691-3200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #