PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State 03 APR 14 PM 3: 23 REINSTATEMENT **DIVISION OF CORPORATIONS** DOCUMENT # 1/0100000 7356 Holiness Unto The Lord Apostolic Faith Ministries, Inc. **400015849** 04/14/03--01005--017 2. Principal Office Address 3. Mailing Office Address 3146 NW 68 Street Suite, Apt, #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified To Do Business in Florida City & State City & State 5. FEI Number Applied For Ft. Lauderdale, Florida 65-1148142 Not Applicable Country Zip Country \$8.75 Additional Fee required 33309 CERTIFICATE OF STATUS DESIRED USA / for a Certificate of Status 7. Name and Address of Current Registered Agent Allan Edwards C/O Clifton H. Rodriquez, CPA, PA Street Address (P.O. Box Number is Not Acceptable) 3146 NW 68 Street Suite, Apt. #, Etc. Suite No.1 State Zip Code Ft. Lauderdale 33309-1206 FL 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. see below 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 Street Address of Each Officer and/or Director Titles City / State / Zipi See attached documents for detail

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 filling 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 too and accurate, and my signature shall have the same legal effect as if made under oath.

I hereby accept des SIGNATURE:x Allan Edwards Registered Age

I hereby accept designation as (754)422-7470

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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1. Corpor	UMENT ation Name iness Ur	Γ# nto To the Lord A	postolic F	aith M	inistry, Inc.						į
				g Office Address NW 68 Street #, etc.			4. Date Incom	porated or	Qualified	<u>.</u>	
City & State  Ft. Lauderdale, Florida  Zip Country			City & State  Ft. Lauderdale, Florida  Zip Country				To Do Business in Florida  5. FEI Number 65-1148142		<del> </del>	oplied For ot Applicable	
33313		Country	33309		USA	ł	G. CERTIFICATE	OF STATU	S DESIRED T	5 Additiona or a Certifica	f Fee require te of Status
			7, 1	lame and A	ddress of Current Regi	istere	d Agent				
	Name Allan Edwards Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.										
											1
<sup>City</sup> Lauderhill								State FL	Zip Code		
<b>8.</b> I, being	appointed the	e registered agent of the abo	ve named corpo	ration, am fa	amiliar with and accept to	he obl	ligations of section	on 607.05	05 or 617.0503, F.S.		-
Signature of Registered Agent								Date	03/06/2003	3	
O Name	and Street A		GISTERED AG		<del></del>		at O disc stous)		<del></del>		· '''iv
Titles	Names and Street Addresses of Each Officer and/or Director (Fic Name of Officers and/or Directors				Street Address of Each Officer and/or Director				City / State	e / Zip	
P/CEO	Allan Edwards			Second Water Comments							
S/D	Merline Edwards			3000 NW 48th Terrace				Lauderhill, Florida 33313			
T/D	Angela Edwards			540 NW 4th Avenue			-	Ft. Lauderdale, Florida 33311			

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3000 NW 48th Terrace

3000 NW 48th Terrace

2500 NW 56th Avenue, Apt No. 508

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Joe Edwards

Dillon Edwards

Andrea Edwards

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03/06/2003

Lauderhill, Florida 33313

Lauderhill, Florida 33313

Lauderhill, Florida 33313

(954)484-050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #