

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N01000007440

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Entity Name:** RESTORATION LIFE MINISTRIES, INC.

**Current Principal Place of Business:**

16311 E BUNCHE PACK  
MIAMI, FL 33054 US

**New Principal Place of Business:**

**Current Mailing Address:**

16311 E BUNCHE PACK  
MIAMI, FL 33054 US

**New Mailing Address:**

**FEI Number:** 14-1695594

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

LEE, KEVIN  
3452 FOXCROFT ROAD  
MIRAMAR, FL 33025 US

**Name and Address of New Registered Agent:**

LEE, KEVIN  
3452 FOXCROFT ROAD  
BLDG.#11, APT.#103  
MIRAMAR, FL 33025 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** KEVIN LEE

01/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** LEE, KEVIN  
**Address:** 3452 FOXCROFT ROAD  
**City-St-Zip:** MIRAMAR, FL 33025 US

**Title:** T  
**Name:** MAXWELL, WILLIE  
**Address:** 6900 NW 28 AVENUE  
**City-St-Zip:** MIAMI, FL 33147 US

**Title:** S  
**Name:** WILLIAMS, SHEILA  
**Address:** 3452 FOXCROFT ROAD  
**City-St-Zip:** MIRAMAR, FL 33025 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** KEVIN LEE

P

01/30/2012

Electronic Signature of Signing Officer or Director

Date