

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
AND  
FILED

03 JUN 10 PM 4:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N01000008353**

**1. Corporation Name**

EGLISE EVANGELIQUE BAPTISTE MORIJA INC

*Handwritten mark*

**2. Principal Office Address**

1501 RIVERLAND RD

Suite, Apt. #, etc.

F

City & State

FORT LAUDERDALE

Zip

33312

Country

U.S.A.

**3. Mailing Office Address**

PO BOX 9826

Suite, Apt. #, etc.

City & State

FORT LAUDERDALE

Zip

33312

Country

U.S.A.

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

11/26/2001

**5. FEI Number**

Applied For

☒ Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☒**

\$8.75 Additional Fee required  
for a Certificate of Status

03/18/03 01040 019 \$306.25  
**REINSTATEMENT 02-03**

**7. Name and Address of Current Registered Agent**

Name

JOSEPH R PRESUME

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

400 PENNSYLVANIA AVENUE

Suite, Apt. #, Etc.

City

FORT LAUDERDALE

State  
FL

Zip Code  
33312

**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

*Handwritten signature of Joseph R. Presume*

REGISTERED AGENT MUST SIGN

Date 04/08/2003

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip        |
|--------|--------------------------------------|---|---------------------------|
| D      | JOSEPH R PRESUME                     | 400 PENNSYLVANIA AVENUE                           | FORT LAUDERDALE FL 33312  |
| D      | MATIAL TONY                          | 657 DRESEB ST NW                                  | PALM BAY FL 32907         |
| D      | LOUIS GEFFRARD                       | 2600 NW 9TH AVENUE                                | WILTON MANORS FL 33311    |
| D      | ALERT TITUS                          | 3129 SW 13TH STREET 3                             | FORT LAUDERDALE FL 33312  |
| D      | SADRACK PHILOGENE                    | 4540 NW 36TH STREET 407                           | LAUDERDALE LAKES FL 33319 |
| D      | MARIE GIRARD                         | 400 PENNSYLVANIA AVENUE                           | FORT LAUDERDALE FL 33312  |

**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:

*Handwritten signature of Joseph R. Presume*

Joseph R. Presume

04/08/2003 954-792-0104

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)