


2005 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

OSAR
REINSTATEMENT

 FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 SEP 28 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000001283

1. Corporation Name

God's Touch ministries, Inc

600060127306
09/30/05--01054--007 **8.75

600060127306
09/30/05--01054--006 **61.25

2. Principal Office Address

4051 N. Ocean Blvd.

Suite, Apt. #, etc.

Suite 214

City & State

Ft. Lauderdale, Florida

Zip

33308

Country

USA

3. Mailing Office Address

4051 N. Ocean Blvd

Suite, Apt. #, etc.

Suite 214

City & State

Ft. Lauderdale, Florida

Zip

33308

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

2-18-2002

5. FEI Number

65-0564174

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

Phillip "Scotty" Ragsdale # 754-214-7772

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

4051 N. Ocean Blvd.

Suite, Apt. #, Etc.

Suite 214

City

Ft. Lauderdale

State

FL

Zip Code

33308

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

Phillip "Scotty" Ragsdale

REGISTERED AGENT MUST SIGN

Date Sept 6, 2005

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.D.	Ragsdale, Phillip "Scotty"	4051 N. Ocean Blvd. Suite 214	Ft. Lauderdale, Fl. 33308
D.	Brown, Hilton A.	310 Fairway Circle	Ft. Lauderdale, Fl. 33326
D.	Allair, Stephen S.	7103 N.W. 78 th Ave.	Tamarac, Fl. 33321

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:

Phillip "Scotty" Ragsdale

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept 6, 2005 754-214-7772

Date

Daytime Phone #

CR2E081 (01/04)