

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000002841

FILED
Oct 20, 2004
Secretary of State**Entity Name:** VICTORIOUS LIVING KINGDOM, INC.**Current Principal Place of Business:**7638 OAK GROVE CIRCLE
LAKE WORTH, FL 33467**New Principal Place of Business:****Current Mailing Address:**7638 OAK GROVE CIRCLE
LAKE WORTH, FL 33467**New Mailing Address:****FEI Number:** 02-0582802**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KASANGANAY, BATUMANE
7638 OAK GROVE CIRCLE
LAKE WORTH, FL 33467 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TP () Delete
Name: KASANGANAY, BATUMANE
Address: 7638 OAK GROVE CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: TS () Delete
Name: MWAMBA, KASANGANAYI F
Address: 1911 WEIGHMONT COURT
City-St-Zip: CHARLOTTE, NC 28227

Title: TT () Delete
Name: KASANGANAY, MANGIELA M
Address: 7638 OAK GROVE CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: BANKS, MARGRADY
Address: 3081 NW 47TH TERRACE
City-St-Zip: FT LAUDERDALE, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BATUMANE KASANGANAY

TP

10/20/2004

Electronic Signature of Signing Officer or Director

Date