

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 AUG 26 AM 8:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #**

1. Corporation Name

Umoja Ministries, Inc

14420 NE 3rd ct  
same as above

2. Principal Office Address

14420 NE 3rd ct

3. Mailing Office Address

same as above

Suite, Apt. #, etc.

3

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Zip

33161

Country

USA

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

07-02-2002

5. FEI Number

20-1412405

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

Hans-Snith Azemard

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

14420 NE 3rd ct

Suite, Apt. #, Etc.

3

City

Miami

State

FL

Zip Code

33161

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

Date 08-14-2004

REGISTERED AGENT MUST SIGN

**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
C	Hans-Snith Azemard	14420 NE 3rd ct #3	Miami, Florida 33161
V	Amaral Pettit	5991 Washington St # 224	Hollywood, Florida 33025
S	Odette Lubin	140 NW 102 St	Miami Shores, Florida 33150
T	Guerline Ganthier	755 NW 201 St	Miami, Florida 33169

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08-14-2004

Date

954-274-3947

Daytime Phone #

CR2E081 (01/04)

202

**UMOJA MINISTRIES, INC.**

954-274-3947

305-893-6840 fax

azemard1@yahoo.com

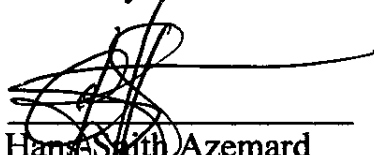
Dear Officer of the Division of incorporation

My name is Hans-Snith Azemard. I am the chairperson of Umoja Ministries, Inc, and I am writing this letter in reference to our petition for reinstatement of our corporation. We are a non-profit, charitable organization. Our status was inactive, enclosed is our reinstatement fee. I would like to also make a request to have our late fee waived, for we did not receive any notice of delinquency for the year 2003; nor any information concerning time and manner necessary for reinstatement.

We are taking the necessary steps to prevent this from happening again. We urge you to consider this waiver in our favor. We are just starting to get our affairs in order and we would really appreciate your understanding of this matter.

We are looking forward to hearing your reply. Enclosed are our reinstatement fee of \$122.50 and the fee for 3 certificate of status at \$8.75 each.

Sincerely Yours

  
\_\_\_\_\_  
Hans-Snith Azemard  
Chairperson