2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000008073

Entity Name: GALILEE HAITIAN BAPTIST CHURCH, INC

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

1600 SW 5 PLACE 3601 W DAVIE BLVD

FORT LAUDERDALE, FL 33312 FORT LAUDERDALE, FL 33312

Current Mailing Address: New Mailing Address:

1600 SW 5 PLACE 2421 SW 5TH PLACE

FORT LAUDERDALE, FL 33312 FORT LAUDERDALE, FL 33312

FEI Number: 20-0194180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

OBAS, MARC A OBAS, MARC A 1600 SW 5 PLACE 2421 SW 5TH P

1600 SW 5 PLACE 2421 SW 5TH PLACE FORT LAUDERDALE, FL 33312 US FORT LAUDERDALE, FL 33312 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: PAUL PETION 04/20/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 OBAS, MARC A
 Name:

 Address:
 2421 SW 5 PLACE
 Address:

Address: 2421 SW 5 PLACE Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition Name: REGINALD, THABITEAN Name: REGINALD, THABUTEAU

Address: 3602 W. DAVIE BLVD.

City-St-Zip: FORT LAUDERDALE, FL 33312

REGINALD, THABUTEAU

Address: 3662 W. DAVIE BLVD.

City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete Title: D (X) Change () Addition
Name: VIL, EMMANUELLA Name: VYL EMMANUELLA

Address: 2617 SW 7TH STREET Address: 2617 SW 7TH STREET

City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: FORT LAUDERDALE, FL 33312

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: MARC OBAS D 04/20/2005