

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 SEP 16 PM 12:37

DOCUMENT # N03000002058

1. Corporation Name

A HOUSE OF PRAYER FOR ALL PEOPLE, INC.

REINSTATEMENT 04-08
B 9/16/08
700135851317
09/15/08--01045--007 **490.00
CR2E081 (12/07)

2. Principal Office Address - No P.O. Box #

4700 North SR 7

3. Mailing Office Address

P.O. Box 190643

Suite, Apt. #, etc.

119

Suite, Apt. #, etc.

City & State

Lauderdale Lakes, FL

City & State

Ft. Lauderdale, FL

Zip

33319

Country

USA

Zip

33319

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number
43-2004534

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Rose L. Hodge

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

5961 NW 61 Ave.

Suite, Apt. #, Etc.

210

City

Tamarac

State

FL

Zip Code

33319

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

Rose L. Hodge
REGISTERED AGENT MUST SIGN

Date 9/10/08

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	Rose L. Hodge	5961 NW 61 Ave. # 210	Tamarac, FL 33319
VP/D	Angela Howell	1843 NW 58th Ave.	Lauderhill, FL 33313
S	Maritza Baptiste	9050 SW 1 ST	Boca Raton, FL 33428
T	Sharon Howell	5990 NW 14th PL	Sunrise, FL 33313
D	Tamecka Stewart	1720 NW 52nd Ave.	Lauderhill, FL 33311
D	Linda Pierre	3911 NW 31 Ave. # 2	Lauderdale Lakes, FL 33309

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 contained in Chapter 119, 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:

Rose L. Hodge
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rose L. Hodge

9/10/08

Date

754-245-0304

Daytime Phone #