## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THISTORM

COR REIN:	りませてはよれ		A DEPARTMENT OF STATE Secretary of State Invision of corporations			FILED  08 JAN 15 PM 2: 30  SECRETARY OF STATE TALL ALLEGE STATE			
DOCUMENT # N0300002063  1. Corporation Name  Mount Olives Church of God World Ministries of Palm Beach County, Inc.							TALLAHASSEE, EĬ ÓŔĬĎ?  800115900098 01/23/0801025019 **507.50  04/29/04 90352 015 \$6/3		
2. Principal Office Address - No P.O. Box # 412 23Rd Street         3. Mai P.O           Suite, Apt. #, etc.         Suite, Apt. # and Apt. #							04/29/04 90352 015 \$6/.  REINSTATEMENT04-0  CR2E081 (1/07)		
	Palm Be		WEST PALM BEACH, FL				To Do Business in Florida 03/07/2003  5. FEI Number 68 – 0 5 4 3 9 3 8   Applied For Not Applicable		
<sup>Zip</sup> 33407	7 F	Palm Beac	h   33407		UNIT	ED STATES	6. CERTIFICATE	OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent Name CQUES DIEUGRAND Street Address (B.D. Box Number is Not Acceptable) Suite, Apt. #, Etc.  BOYNTON BEACH,  Strate  Strate  Strate  FL 33						33437	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 native above n									
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				c	ity / State / Zip
Р	JEAN SMITH SOIRO			207 S. SEQUOIA DR			DR	West Palm	Beach, FL 33407
VP	JEAN COPINGE PIERRE-PAUL 41				412 23Rd Street			West Palm	Beach, FL 33407
TD	GERMINA SOIRO			207 S. SEQUOIA DR			DR	West Palm	Beach, FL 33407
D	LUCARNE JEAN PHILISTIN			412 23Rd Street				West Palm	Beach, FL 33407
D	ROBERT DENEUS			412 23Rd Street				West Palm	Beach, FL 33407
D	LIFAITE CHARLES			207 S. SEQUOIA DR			DR	West Palm	Beach, FL 33407
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 physignature shall have the same legal effect as if made under oath.  SIGNATURE:    01/01/2008   (561)667-9052									