

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000004137

FILED  
Dec 05, 2007  
Secretary of State

Entity Name: FLAMME CELESTE CHURCH, INC.

**Current Principal Place of Business:**

5441 N SR 7  
FORT LAUDERDALE, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

5441 N SR 7  
FORT LAUDERDALE, FL 33319

**New Mailing Address:**

FEI Number: 59-3769336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LINDOR, MICHAEL REV PAS  
5605 NW 59 AVE  
TAMARAC, FL 33312 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: LINDOR, MICHAEL

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: LINDOR, MICHAEL  
Address: 6033 KIMBERLY BLVD  
City-St-Zip: NORTH LAUDERDALE, FL 33360

Title: DV ( ) Delete  
Name: JOSEPH, MARLEINE  
Address: 6033 KIMBERLY BLVD  
City-St-Zip: NORTH LAUDERDALE, FL 33360

Title: DT ( ) Delete  
Name: ETIENNE, JEANNE  
Address: 5605 NW 50 AVE  
City-St-Zip: TAMARAC, FL 33319

Title: DS ( ) Delete  
Name: PRUDENT, EUGENE  
Address: 6033 KIMBERLY BLVD  
City-St-Zip: NORTH LAUDERDALE, FL 33360

Title: D ( ) Delete  
Name: MEDARD, JOSETTE  
Address: 6033 KIMBERLY BLVD  
City-St-Zip: NORTH LAUDERDALE, FL 33360

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LINDOR, MICHAEL

DP

12/05/2007

Electronic Signature of Signing Officer or Director

Date