

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000006724

FILED
Jun 03, 2005
Secretary of State

Entity Name: DR. STEVEN COLON MINISTRIES, INC.

Current Principal Place of Business:

4216 KINGBIRD COURT
ORLANDO, FL 32826

New Principal Place of Business:

53 S. SEMORAN BLVD.
ORLANDO, FL 32807

Current Mailing Address:

4216 KINGBIRD COURT
ORLANDO, FL 32826

New Mailing Address:

53 S. SEMORAN BLVD.
ORLANDO, FL 32807

FEI Number: 04-3770528 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: SPIEGEL & UTRERA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COLON, STEVEN DR.
Address: 4216 KINGBIRD COURT
City-St-Zip: ORLANDO, FL 32826

Title: VSD () Delete
Name: CHEVERE-COLON, LISANDRA
Address: 4216 KINGBIRD COURT
City-St-Zip: ORLANDO, FL 32826

Title: TD () Delete
Name: ALICEA, MINERVA
Address: 4216 KINGBIRD COURT
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: COLON, BLAS
Address: 7702 TOUCAN DR.
City-St-Zip: ORLANDO, FL 32822

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: STEVEN COLON

PD

06/03/2005

Electronic Signature of Signing Officer or Director

Date