## 2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N0300006815  1. Entity Name THE EBENEZER FOUNDATION, INC.					FILE 04 NOV 29	PH 4: (	
MIAMI, FL 3	77TH TERRACE P. 3177 GO	illing Address O.BOX 462 OULDS, FL 33170	C		SECRETAR'r ( TALLAHASSEE	JI STAT E, FLORII	E )a 
2. Principal Place of Business 112955228657 Suite, Apt. #, etc.  3. Mailing Address 7.0.30 x 46 2 Suite, Apt. #, etc.  City & State				11222004 (RE	SIAIENE En. NP.	39 (6/04).	2004
74 14 . Zip 3-3 1-4	Country Country 3	3,70 B	Country SA	<b>68-05 5.</b> Certificate of S	totas Desirea	\$8.75 Addi	Applicable tional
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  Name  Name  Name  Not Acceptable  Street Address (P.O. Box Number is Not Acceptable)  City M ( Add ) FL Zip Code							
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE THOUAS GREEK Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
FILE NOW!!! FEE IS \$61.25 After January 1, 2005, Fee will be \$122.50  In accordance with s. 607.193(2)(b corporation did not receive the prior					Make check Florida Depar	• •	. 1.
10.	OFFICERS AND DIRECTO			ADDITIONS/CHANG	SES TO OFFICERS AND DIR	ECTORS IN	
NAME STREET ADDRESS CITY-ST-ZIP	PRES STEWART, ERROL N 12030 SW 177TH TERRACE MIAMI, FL 33177	, p	TITLE NAME STREET ADDRESS CITY-ST-ZIP	117297		##70.0	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BROWN, CHARLES U 12030 SW 177TH TERRACE MIAMI, FL 33177	05,000 N	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1 OC 11/29/0	00430469 401071001	**70.(	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA BROWN, LINETTE N 12030 SW 177TH TERRACE MIAMI, FL 33177	A	TITLE NÁME STREET ADDRESS CITY-ST-ZIP	- <u> </u>	•	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC STEWART, BRONTIE H 12030 SW 177TH TERRACE MIAMI, FL 33177	M	TITLE NAME STREET ADDRESS STY-ST-ZIP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			ITTLE NAME STREET ADDRESS CITY-ST-ZIP	,		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR CONTROL Date Daytime Phone #							