



2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N03000009870		
1. Entity Name ILLUMINATIVE COMMUNITY DEVELOPMENT CORP.		

Principal Place of Business 7972 VENETIAN ST. MIRAMAR, FL 33023	Mailing Address 7972 VENETIAN ST. MIRAMAR, FL 33023
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country


FILED
05 APR 18 AM 11:00
7/26/04 900053921229 7010


04122005 REIN-NP CR2E099 (6/04)

4. FEI Number 75-3137155	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GASPARD, JOHNNY A 2527 OPA LOCKA BLVD. OPA LOCKA, FL 33054		7. Name and Address of New Registered Agent Name Juanita Mincey Street Address (P.O. Box Number is Not Acceptable) 12868 SW 21st Street City Miramar FL Zip Code 33027	
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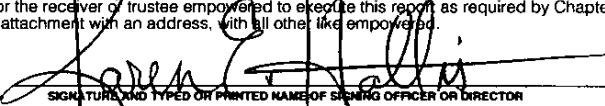
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE 4-12-05
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$422.50 \$61.25	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOLLIS, KAREN 7972 VENETIAN ST. MIRAMAR, FL 33023 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD/TD Bruce E. Hollis 7972 Venetian Street Miramar, FL 33023 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GASPARD, JOHNNY A 6157 N.W. 167TH ST., STE. F-12 MIAMI LAKES, FL 33015 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900053921229 05/05/05--01052--020 **\$61.25 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BUTLER, BUFFY P.O. BOX 970583 FT. LAUDERDALE, FL 33021 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing 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:  DATE 4/12/05 DAYTIME PHONE # (954) 894.0900

April 12, 2005

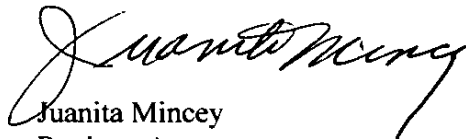
Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Illuminative Community Development Corporation has Admin Dissolution for annual report for the year 2004. A check for \$70.00 was mail in for the annual report for 2004. We did not receive the correspondence that was mail to us from your office on 7-28-2004, requesting a correction on the annual report. Attached is a copy of the returned check of \$70.00 that was mail to you and also a check in the amount of \$61.25 for this year's annual report.

Please send all correspondence to Juanita Mincey at P.O. Box 541496 Opa
Locka, Florida 33054

Thank you,



Juanita Mincey
Register Agency