2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Apr 21, 2006
Secretary of State

DOCUMENT# N04000007697

Entity Name: L'HEURE DU REVEIL MINISTRIES, INC.

Current Principal Place of Business:

10455 NW 12 AVE
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

10455 NW 12 AVE
MIAMI, FL 33150

New Mailing Address:

P O BOX 681321
MIAMI, FL 33150

FEI Number: **FEI Number Applied For (X)** **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:

PHANORD, RUBEN
10455 NW 12 AVE
MIAMI, FL 33150 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: RUBEN PHANORD
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PHANORD, RUBEN
Address: 10455 NW 12 AVE
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete
Name: ELIEN, MYRLANDE
Address: 5201 SW 22ND AVE
City-St-Zip: MIAMI, FL 33023

Title: D ( ) Delete
Name: CARRE, MARJORIE
Address: 1043 NW 99 STREET
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition
Name: ELIEN, MYRLANDE
Address: 7737 EMBASSY BLVD
City-St-Zip: MIRAMAR, FL 33023

Title: D (X) Change ( ) Addition
Name: PAMPHILE, KETTELY
Address: 1043 NW 99 STREET
City-St-Zip: MIAMI, FL 33150 US

I hereby certify that the information supplied with this filing does not qualify for the 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: RUBEN PHANORD P 04/21/2006
Electronic Signature of Signing Officer or Director — Date