2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000011579

Entity Name: MICHEL MINISTRY INC

FILED Aug 01, 2007 Secretary of State

O 1 D.	in single Place of Business	Name Daine	inal Blace of Business	
1001 NE 39	rincipal Place of Business: OTH DRIVE 14 W PARK, FL 33334	New Princ	ipal Place of Business:	
	·			
Current Mailing Address:		New Maili	New Mailing Address:	
	9TH DRIVE 14 W PARK, FL 33334			
	41-2161402 FEI Number Applied For () FEI I se with s. 607.193(2)(b), F.S., the corporation did not received. Address of Current Registered Agent:			
MICHEL, M 1001 NE 39			ğ ğ	
The above in the State	named entity submits this statement for the purpos of Florida.	e of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE: MICHELET MICHEL			
	Electronic Signature of Registered Agent		Date	
OFFICERS	AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete MICHEL, MICHELET 1001 NE 39TH DRIVE 14 W OAKLAND PARK, FL 33334	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () Delete MORITES, PERRIER 1001 NE 39TH DRIVE 14 W OAKLAND PARK, FL 33334	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TRES () Delete LOSIER, BELONY 1001 NE 39TH DRIVE 14 W OAKLAND PARK, FL 33334	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () Delete MICHEL, MICHELET 1001 NE 39TH DRIVE 14 W OAKLAND PARK, FL 33334	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () Delete LOSIER, BERNARD 1001 NE 39TH DRIVE 14 W OAKLAND PARK, FL 33334	Title: Name: Address: City-St-Zip:	DIR (X) Change () Addition LOSIER, BERNARD 3820 NE 10 AVE # W OAKLAND PARK, FL 33334	
Title: Name: Address: City-St-Zip:	DIR () Delete MORITES, PERRIER 1001 NE 39TH DRIVE 14 W OAKLAND PARK, FL 33334	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MICHELET MICHEL PR 08/01/2007