

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N04881

1. Corporation Name

BETHESDA CHURCH, INC.

Principal Place of Business

3992 NW 167TH ST
MIAMI FL 33054
US

Mailing Address

P. O. BOX 681321
MIAMI FL 33168
US

FILED

04 APR 20 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

10455 NW 12 Ave.
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

10455 NW 12 Ave.
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

08/28/1984

5. FEI Number

59-2599317

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	PHANORD, RUBEN REV.	970 NE 163 STREET	MIAMI FL 33162
TD	CHARLES, GERARD	9311 ORANGE GROVE DR #414	FT. LAUDERDALE FL 33324
SD	CARRE, MARJORIE	1043 NW 99TH ST	MIAMI FL 33150

8. Name and Address of Current Registered Agent

PHANORD, RUBEN REV.
3930 NW 167TH ST
MIAMI FL 33054

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Rev. Ruben Phanord
REGISTERED AGENT MUST SIGN

Date 3-26-2004

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rev. Ruben Phanord

3-26-2004 (305) 6948882

Date

Daytime Phone #

CR2E040 (8/00)