

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 FEB 11 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # NO5000001452

1. Corporation Name

Leonard Obeng-Nyarko Ministries Inc,

200117724702
02/11/08--01048--007 **183.75

2. Principal Office Address - No P.O. Box #

2802 NW 60th Terrace

3. Mailing Office Address

2802 NW 60th Terrace

Suite, Apt. #, etc.

Apt # 256

Suite, Apt. #, etc.

Apt # 256

City & State

Fort. Lauderdale, FL

City & State

Fort. Lauderdale, FL

Zip

33313

Country

U.S.A

Zip

33313

Country

U.S.A

REINSTATEMENT

**4. Date Incorporated or Qualified
To Do Business in Florida**

2/16/2005

5. FEI Number

20-2366333

☐ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Phil's Accounting & Business Service

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

6299 W. Sunrise Blvd. Suite 203

Suite, Apt. #, Etc.

203

City

Sunrise

State

FL

Zip Code

33313

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Philbert Hillman

Date 2/06/08

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P.	Leonard Obeng-Nyarko	2802 NW 60th Terrace #256	Fort. Lauderdale FL 33313
V.P	Eleanor Obeng-Nyarko	2802 NW 60th Terrace #256	Fort. Lauderdale, FL, 33313
Sec.	Claudette H. Forrest	112 Braxberry Way	Holly Springs NC, 27540
T.	Donna Satahoo.	1130 Sussex Dr #1524	N. Lauderdale FL, 33068

10. 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 contained in Chapter 119, 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:

Philbert Hillman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/06/08

Date

954-825-6662

Daytime Phone #