2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 15, 2006
Secretary of State

DOCUMENT# N05000001817

Entity Name: NEW ALPHA WORSHIP CENTER, INC.

Current Principal Place of Business:

44 NORTHWEST 150TH STREET
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

44 NORTHWEST 150TH STREET
MIAMI, FL 33168

New Mailing Address:

FEI Number: 20-2382809 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILLIAMS, ANGELA E
205 S.W. 67TH TERRACE
PEMBROKE PINES, FL 33023 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: ERROL E WILLIAMS

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WILLIAMS, ERROL E
Address: 44 NORTHWEST 150TH STREET
City-St-Zip: MIAMI, FL 33168

Title: VPD ( ) Delete
Name: WILLIAMS, ANGELA E
Address: 205 S.W. 67TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33023

Title: D ( ) Delete
Name: FENDER, PHILIP
Address: 4055 PINE ISLAND ROAD
City-St-Zip: SUNRISE, FL 33324

Title: D ( ) Delete
Name: WILLIAMS, RONA
Address: 6714 S. PARKWAY DRIVE
City-St-Zip: MARGATE, FL 33068

Title: D ( ) Delete
Name: HENRY, IDENA
Address: 4301 N.W. 201ST TERRACE
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: ANGELA E WILLIAMS VPD 11/15/2006

Electronic Signature of Signing Officer or Director — Date