

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000005125

FILED  
Dec 06, 2006  
Secretary of State

**Entity Name:** ELOHIM INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

9447 FONTAINEBLEAU BLVD #108  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

9447 FONTAINEBLEAU BLVD #108  
MIAMI, FL 33172

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

**Name and Address of New Registered Agent:**

GIRON, MYNOR  
9447 FONTAINEBLEAU BLVD #108  
MIAMI, FL 33172 US

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: MYNOR GIRON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GIRON, MYNOR  
Address: 9447 FONTAINEBLEAU BLVD #108  
City-St-Zip: MIAMI, FL 33172

Title: VS ( ) Delete  
Name: MICHELLE, ORLANDO S  
Address: 9447 FONTAINEBLEAU BLVD #108  
City-St-Zip: MIAMI, FL 33172

Title: T ( ) Delete  
Name: MOREL, NORA  
Address: 3147 SW 24 TERR  
City-St-Zip: MIAMI, FL 33145

**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:

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: MYNOR GIRON

P

12/06/2006

Electronic Signature of Signing Officer or Director

Date