

**2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 09, 2008  
Secretary of State**

DOCUMENT# N05000005552

Entity Name: PRAY U.S.A.I, INC.

**Current Principal Place of Business:**

5022 - 5TH WAY N  
ST. PETERSBURG, FL 33703

**New Principal Place of Business:**

7111 142ND AVE. LOT 42  
LARGO, FL 33771

**Current Mailing Address:**

PO BOX 22066  
ST PETERSBURG, FL 33742

**New Mailing Address:**

FEI Number: 94-3222766      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MALONE, WILLIAM C  
5022 - 5TH WAY N  
ST. PETERSBURG, FL 33703      US

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

MALONE, WILLIAM C  
7111 142ND AVE. LOT 42  
LARGO, FL 33771      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: WILLIAM C. MALONE      10/09/2008  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MALONE, WILLIAM C  
Address: 5022 - 5TH WAY N  
City-St-Zip: ST. PETERSBURG, FL 33703

Title: D      ( ) Delete  
Name: MALONE, PAMELA L  
Address: 5022 - 5TH WAY N  
City-St-Zip: ST. PETERSBURG, FL 33703

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: MALONE, WILLIAM C  
Address: 7111 142ND AVE. LOT 42  
City-St-Zip: LARGO, FL 33771

Title: D      (X) Change ( ) Addition  
Name: MALONE, PAMELA L  
Address: 7111 142ND AVE. LOT 42  
City-St-Zip: LARGO, FL 33771

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: WILLIAM C. MALONE      PRES      10/09/2008  
Electronic Signature of Signing Officer or Director      Date