


2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N05000006661 1. Entity Name EAST SIDE BAPTIST OF HOMESTEAD, INC.	
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FILED
06 OCT 20 AM 10: 28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 1541 SE 12 AVE. SUITE 4 HOMESTEAD, FL 33035	Mailing Address 1541 SE 12 AVE. SUITE 4 HOMESTEAD, FL 33035
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2. Principal Place of Business 1541 SE 12 AVE	3. Mailing Address 1541 SE 12 AVE
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10182006 REIN-NP CR2E099 (11/05) 06

Suite, Apt. #, etc. SUITE # 3	Suite, Apt. #, etc. SUITE #3
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City & State HOMESTEAD FL	City & State HOMESTEAD FL
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4. FEI Number 86-1063184	Applied For Not Applicable
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Zip 33035	Country USA	Zip 33035	Country USA
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5. Certificate of Status Desired	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MCCREADY, JAMES L 2340 SE 23 TER HOMESTEAD, FL 33035
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7. Name and Address of New Registered Agent Name JOE BOROK Street Address (P.O. Box Number is Not Acceptable) 1541 SE 12 AVE SUITE #3 City HOMESTEAD FL Zip Code 33035
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE JOE BOROK, President **JOE BOROK** 10/17/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$236.25 After January 1, 2007, Fee will be \$297.50		Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	P <input checked="" type="checkbox"/> Delete MCCREADY, JAMES L STREET ADDRESS 2340 SE 23 TER CITY-ST-ZIP HOMESTEAD, FL 33035
TITLE	VP <input type="checkbox"/> Delete BOROK, JOE STREET ADDRESS 1541 SE 12 AVE. SUITE 4 CITY-ST-ZIP HOMESTEAD, FL 33035
TITLE	SEC <input type="checkbox"/> Delete HAGAN, WALTER M STREET ADDRESS 705 SE 27 LN CITY-ST-ZIP HOMESTEAD, FL 33033
TITLE	<input type="checkbox"/> Delete STREET ADDRESS \$200/25 CITY-ST-ZIP
TITLE	<input type="checkbox"/> Delete STREET ADDRESS CITY-ST-ZIP
TITLE	<input type="checkbox"/> Delete STREET ADDRESS CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JOE BOROK STREET ADDRESS 1541 SE 12 AVE SUITE #3 CITY-ST-ZIP HOMESTEAD FL 33035
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE BOROK **JOE BOROK** 10/17/06 305-772-1032