

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000009221

**FILED**  
**Oct 12, 2006**  
**Secretary of State**

**Entity Name:** VALLEY OF FAITH INTERNATIONAL, INC.

**Current Principal Place of Business:**

5610 EAST DR MARTIN LUTHER KING BOULEVARD  
TAMPA, FL 33619

**New Principal Place of Business:**

2322 W. CLIFTON ST  
TAMPA, FL 33603

**Current Mailing Address:**

5610 EAST DR MARTIN LUTHER KING BOULEVARD  
TAMPA, FL 33619

**New Mailing Address:**

2322 W. CLIFTON ST  
TAMPA, FL 33603

**FEI Number:** 20-4313926

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**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:**

CHARLES, MARTIN  
2208 EAST HANNA AVENUE  
TAMPA, FL 33610 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: MARTIN CHARLES

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CHARLES, MARTIN  
Address: 2208 EAST HANNA AVENUE  
City-St-Zip: TAMPA, FL 33610

Title: VPD ( ) Delete  
Name: SMITH, LEROY  
Address: 4201 CHESTWOOD COURT, APT. 185  
City-St-Zip: TAMPA, FL 33610

Title: TSD ( ) Delete  
Name: ISAAC, SAINTHERESE  
Address: 9447 WINDERMERE LAKE DRIVE, APT. 201  
City-St-Zip: RIVIEWE, FL 33569

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: VP ( ) Change (X) Addition  
Name: SMYZER, ROGER  
Address: 250 SIESTA LANE  
City-St-Zip: LARGO, FL 33770

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: MARTIN CHARLES

P

10/12/2006

Electronic Signature of Signing Officer or Director

Date