2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 20, 2007
Secretary of State

DOCUMENT# N06000010438

Entity Name: JOSHUA GENERATION GLOBAL MINISTRY, INC.

Current Principal Place of Business:

5300 NW 33RD AVENUE
SUITE 202
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

17798 SW 28TH STREET
MIRAMAR, FL 33029

Current Mailing Address:

5300 NW 33RD AVENUE
SUITE 202
FT. LAUDERDALE, FL 33309

New Mailing Address:

17798 W 28TH STREET
MIRAMAR, FL 33029

FEI Number: 02-8043940 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

WRAY, LORNE A
5300 NW 33 AVE
SUITE 202
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

WRAY, LORNE A
3831 NE 24TH AVENUE
LIGHTHOUSE POINT, FL 33064 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: LORNE WRAY 09/20/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PRES	( ) Delete
Name:	WRAY, LORNE A	
Address:	5300 NW 33RD AVENUE, STE 202	
City-St-Zip:	FT. LAUDERDALE, FL 33309	
Title:	VP	( ) Delete
Name:	WRAY, JULIEN	
Address:	P.O. BOX 566022	
City-St-Zip:	MIAMI, FL 33256	
Title:	O/D	( ) Delete
Name:	GORDON, MELISSA	
Address:	1205 SW 46TH AVENUE	
City-St-Zip:	DEERFLIELD BEACH, FL 33442	
Title:	O/D	( ) Delete
Name:	WRAY, LAURA	
Address:	P.O. BOX 272066	
City-St-Zip:	BOCA RATON, FL 33427	
Title:	O /D	( ) Delete
Name:	WESCOTT, LAUREN	
Address:	5300 NW 33RD AVENUE, STE 202	
City-St-Zip:	FT. LAUDERDALE, FL 33309	
Title:	O/ D	( ) Delete
Name:	ROBERTS, DAVID	
Address:	5300 NW 33RD AVENUE, STE 202	
City-St-Zip:	FT. LAUDERDALE, FL 33309	

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

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: LORNE A. WRAY PRES 09/20/2007
Electronic Signature of Signing Officer or Director — Date