

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000007863

FILED
Feb 05, 2009
Secretary of State

Entity Name: GOLD DIGGER MINISTRIES, INC.

Current Principal Place of Business:

10430 SW 56 STREET
COOPER CITY, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 292938
DAVIE, FL 33329 US

New Mailing Address:

P.O. BOX 290562
DAVIE, FL 33329 US

FEI Number: 26-0694719 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:

GONZALEZ, BARBARA C
10430 SW 56 STREET
COOPER CITY, FL 33328 US

Name and Address of New Registered Agent:

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: BARBARA GONZALEZ

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, BARBARA C
Address: PO BOX 292938
City-St-Zip: DAVIE, FL 33329 US

Title: VP () Delete
Name: GONZALEZ, WILLIAM
Address: PO BOX 292938
City-St-Zip: DAVIE, FL 33329 US

Title: S () Delete
Name: IZQUIERDO, FRANK
Address: PO BOX 292938
City-St-Zip: DAVIE, FL 33329 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, BARBARA C
Address: PO BOX 290562
City-St-Zip: DAVIE, FL 33329 US

Title: VP (X) Change () Addition
Name: GONZALEZ, WILLIAM
Address: PO BOX 290562
City-St-Zip: DAVIE, FL 33329 US

Title: S (X) Change () Addition
Name: IZQUIERDO, FRANK
Address: PO BOX 290562
City-St-Zip: DAVIE, FL 33329 US

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: BARBARA GONZALEZ

P

02/05/2009

Electronic Signature of Signing Officer or Director

Date