

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N07000010302

**FILED**  
**Jul 22, 2010**  
**Secretary of State**

**Entity Name:** MOVING HANDS OF GOD'S MINISTRY, INC

**Current Principal Place of Business:**

5317 NORTH WEST 107 AVENUE  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

1609 SOUTH STATE ROAD 7  
NORTH LAUDERDALE, FL 33068

**Current Mailing Address:**

5317 NORTH WEST 107 AVENUE  
CORAL SPRINGS, FL 33076

**New Mailing Address:**

1609 SOUTH STATE ROAD 7  
NORTH LAUDERDALE, FL 33068

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

PITTERS, MARK A  
5317 NORTH WEST 107 AVENUE  
CORAL SPRINGS, FL 33076 US

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

GREEN - ALVES, JOAN  
1609 SOUTH STATE ROAD 7  
NORTH LAUDERDALE, FL 33068 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: JOAN GREEM- ALVES

07/22/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GREEN - ALVES, JOAN  
Address: 1609 SOUTH STATE ROAD 7  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: VP  
Name: ALVES, PETER JUNIOR  
Address: 1609 SOUTH STATE ROAD 7  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: T  
Name: GREEN, LEONIE  
Address: 1609 SOUTH STATE ROAD 7  
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

Title: S  
Name: BREIANNA, ALVES  
Address: 1609 SOUTH STATE ROAD 7  
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

Title: D  
Name: BARRETT, ELAINE  
Address: 1609 SOUTH STATE ROAD 7  
City-St-Zip: NORTH LAUDERDALE, FL 33068

I hereby 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 all other like empowered.

SIGNATURE: JOAN GREEN - ALVES

PRES

07/22/2010

Electronic Signature of Signing Officer or Director

Date