

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N09065 1. Entity Name MARANATHA FAITH AND REVIVAL CHURCH, INC.						FILED 07 DEC 28 PM 3:52 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 2656 S.W. 87TH AVE. MIAMI, FL 33165				Mailing Address 2656 S.W. 87TH AVE. MIAMI, FL 33165			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		 REINSTATEMENT 07 10192007 REIN-NP CR2E099 (1/07)			
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country				
4. FEI Number 59-2531409				Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
PEREZ, IRMA E. 2656 S.W. 87TH AVE. MIAMI, FL 33165				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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 _____				REINSTATEMENT 07 DATE _____			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)							
FILE NOW!!! FEE IS \$236.25 After January 1, 2008, Fee will be \$297.50				Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEREZ, IRMA E 10440 SW 51 ST. MIAMI, FL 33165 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 300113469693 12/28/07--01014--012 **245.50		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LUGO, HENRY 9244 SW 154 AVE. MIAMI, FL 33196 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PEREZ, MISAEAL 10440 SW 51 STREET MIAMI, FL 33165 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GONZALEZ, VICENTE R 11007 SW 25TH ST MIAMI, FL 33165 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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: <u>IRMA E. PEREZ</u>				12/27/07 305590000 Date Daytime Phone #			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							

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