PLEASE REA	D ALL INSTRUCTIONS		LETING THIS FORM.
. APPLICATION	FLORIDA DEPARTMEN Sandra B. Mort		FILED
FOR REINSTATEMENT	Secretary of S		97 APR 17 PM 2:51
DOCUMENT # N 3	1654		SECRETARY OF STATE TALLAHASSEE, FLORIDA
1. Corporation Name  EGLISE EVANGELIQUE HAITIENNE DES			TALLAHASSEE, FLORIDA
FRERES UNIS INC. 13201 NW 28 AVE OPA-LOCKA FL 33054 #306			9000021469094
Principal Place of Business Mailing Address			-04/17/9701114001 ****192.50 ****192.50
Annual Reports to	r 1995, 1996 i	199 /	**************************************
If above addresses are incorrect in any way, lin  2. New Principal Office Address, if Applicable	e through incorrect information and enter of 3. New Mailing Office Address, If A	Applicable 4. Date	e Incorporated or Qualified 10-20 1990 Do Business in Florida
11802 N.W 13 AV 2 Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI	Number Applied For
City & State  NIPM  F/A  Country  Country	Eity/8 State FLORIDA	6.	- 08-34-5536-55C   Not Applicable   \$8.75 Additional Fee required
7. Names and Street Addresses of Each Officer	33054 D	ADE CER	tur a Certificate of Status
Title(s)  1 2	Stre Offi	et Address of Each cer and/or Director e Post Office Box Numbers)	City / State / Zip
Sec: PIERRE L. Philippe 325 NW 33 St MIAMI FL. 33/27			
Res: FEAN-CHARLES Lubermique MIAMI F1.33127			
T-Ras: SONY LEO 14085		V.E 16 AVE MIAMI F/ 33161	
		E16 AVE	MIAMI FT.33/61
		O Alem	ne and Address of New Designation of Agent
Agent: LAURENT B. Saint Pierre Paston: - Pierre L. Philippe  Street Address of P. O. Box Number is Not Acceptable)			
12001 1111 2801/27700 200			
0PA-LOCKA-FL 33054 Suite, Apt. *, Etc.  City State   Zip Code			
10. I, being appointed the registered agent of the	e above n <u>amed corporation, am familiar wit</u>	MIANIT	FL 33/27
Signature of Registered Agent Date 04-14-97 Registered Agent Date 04-14-97			
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No No No No Intangible tax.)			
12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: OHATURE AND TYPE OR PROPERTY SIGNING OFFICER OR DIRECTOR DATE DATE DAYS THE PROPERTY DAYS THE PROPERTY OF DESCRIPTION OF THE PROPERTY OF DESCRIPTION OF THE PROPERTY OF THE PROPERT			
— <del>—</del> — <del>—</del> — — — — — — — — — — — — — —			681-5824

FILED

97 APR 17 PH 2:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



## EGLISE EVANGELIQUE HAITIENNE DES FRERES UNIS

11802 N.W. 13 AVE, Miami florida 33168, tel.: (305) 681-5824

ARTICLE VI \* INITIAL OFFICERS AND DIRECTORS

The names and residence address of the Officers and Directors who are to manage all of the affairs of the Corporation until the first annual meeting are:

Lubermider Jean-Charles, President 34 N.W. 50 Street

Miami Florida 33127

Sony Leo. Vice President 14085 N.E. 16 Avenue

Miami Florida 33161

Pierre Lovy Philippe, Secretary 325 N.W. 3th Avenue

Miami Florida 33127

Mrs Sonya Leo , Treasurer 14085 N.E. 16th Avenue

Miami Florida 33161

IN WITNESS WHEREOF. the undersigned have subscribed their smes under seal this 21 --- day of Tromany 4997.

Lubernione Leave grantes.

PIERRE LOVY PHILIPPE

SONY LEO.

MRS. SONYA LEO.

LAURENT BASAINT PIERRE