

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

0-03



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUN -6 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

N43943

1. Corporation Name

CHARIS Christian Fellowship
12200 SW 129th Ct
Miami, Fl 33186

~~000020562650~~
06/06/03--01027-005 **245.00

2. Principal Office Address

12200 SW 129th Ct

3. Mailing Office Address

SAME

000020562650
06/06/03--01027--005 **245.00

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Fl

City & State

Zip

33186

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

6/17/1991

5. FEI Number

N43943

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Elkin Espinal

Street Address (P.O. Box Number is Not Acceptable)

10835 SW 112 Ave

Suite, Apt. #, Etc.

#209

City

Miami

State

FL

Zip Code

33176

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Elkin Espinal

REGISTERED AGENT MUST SIGN

Date 6/3/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
T	Solandry Espinal	10835 SW 112 Ave #209	Miami, Fl 33176
D	Elkin Espinal	10835 SW 112 Ave #209	Miami, Fl 33176
C	Joseph Holbrook	25505 SW 126 Ct	Princeton, Fl 33032
C	William H Carp	2194 SW 25 Terr	Miami, Fl 33133

10. 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:

Elkin Espinal

Elkin Espinal

6/3/03

305-235-4471

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

246



Christians in Action to Redeem and Influence Society

April 30, 2003

Department of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

Gentlemen:

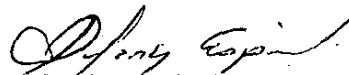
Enclosed please enclosed find our check #5682 in the amount of \$245.00 for failure to file our No-Profit Corporation annual report since 1999.

The reason being that we never received our notices, and somehow the address got mixed up. We are also enclosing a new signed Corporation Reinstatement form

Please correct our Principal Office Address and our Mailing address to:
CARIS Christian Fellowship
12200 SW 129th Ct
Miami, Fl 332186

We apologize for any inconvenience and we request that you to waive any penalties incurred.

Sincerely


Solandry Espinal
Treasurer

SE/ns
Encl

Pastor Elkin Espinal

12200 SW 129th Court, Miami, FL 33186

Tel: (305) 235-4471 * Fax: (305) 235-7161