PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR · REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N93000002787

1. Corporation Name

いしたないというないというないと

一方本の本のではないいというないとうない

ľ

A CONTRACTOR OF THE PARTY OF TH

P.

SIGNATURE:

BIBLE TEACHERS INTERNATIONAL, INC.

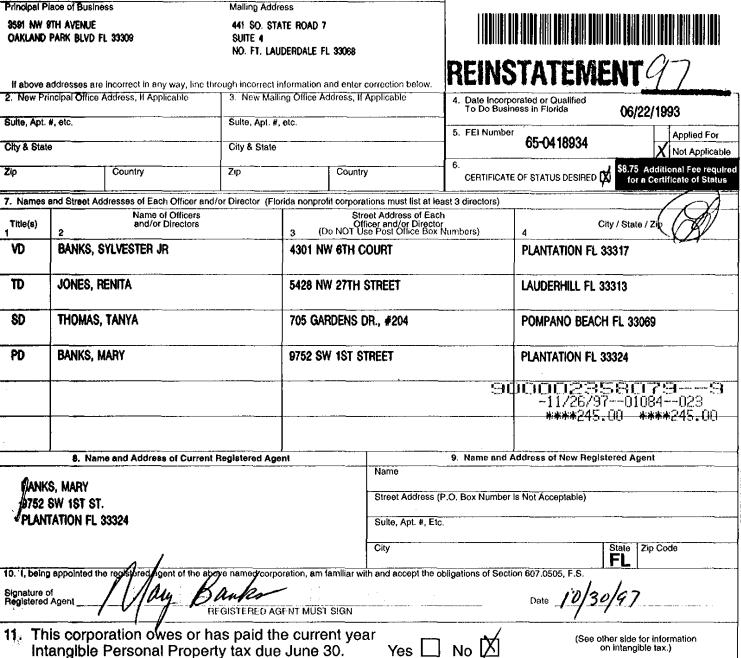
Malling Address

FILED

97 NOV 24 PM 1: 38

SECRETARY OF STATE TALLAHASSEE. FLORIDA

10/30/97 (954)917-3200



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

OF SIGNING OFFICER OR DIRECTOR

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE AND TYPED OR PRINTED NAM