## 2004 NOT OF PROFIT CORPORATION REINSTATEMENT

## DOCUMENT # N93000003062 FILED EGLISE DE DIEU EVANGELIQUE CHURCH OF GOD, INC. 04 NOV -4 AM II: 59 Principal Place of Business Mailing Address 12800 N.E. 6TH AVE. 12800 N.E. 6TH AVE. NORTH MIAMI, FL 33161 NORTH MIAMI, FL 33161 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State FEI Number NOT APPLICABLE Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THOMAS, MARIE J 12800 NE 6 AVENUE Street Address (P.O. Box Number is Not Acceptable) NORTH MIAMI, FL 33161 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) Make check payable to FILE NOW!!! FEE IS \$61.25 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2005, Pee will be \$122.50 Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change · ☐ Addition TITLE ☐ Delete TITLE RAPHAEL, SIMON PASTOR NAME NAME 100042475151 STREET ADDRESS 121 NE 110TH ST. STREET ADDRESS MIAMI, FL 33161 /04/04--01045--006 CITY-ST-ZIP CITY-ST-ZIP $\overline{\mathsf{VD}}$ TITLE ☐ Delete TITLE ☐ Change ☐ Addition SIMON, MIREILLE MAME NAME STREET ADDRESS 12 NE 157TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF MIAMI, FL 33161 'VD TITLE ☐ Delete TITLE □ Change ☐ Addition VIL. GLADYS NAME NAME STREET ADDRESS 851 NE 158TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33161 CITY-ST-ZIP TD ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME PETIT-FRERE, JEAN NAME STREET ADDRESS **729 NW 145TH STREET** STREET ADDRESS MIAMI, FL 33168 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition TITLE PIERRE, ALOURDES NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 endress, with all other like empowered.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITI E

NAME STREET ADDRESS **1258 NE 112TH STREET** 

470 NE 103RD STREET

MIAMI, FL 33161

THOMAS, MARIE J

MIAMI, FL 33161

SD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

X11-02-04

305-892-2828

☐ Change

☐ Addition

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