2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 03, 2004
Secretary of State

DOCUMENT# N93000004245

Entity Name: GHANAIAN ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

4341 NW 19TH ST
APT. 8
LAUDERHILL, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 667727
POMPANO, FL 33066 0S

New Mailing Address:

FEI Number: 65-0438024 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KUBAYANDA, GILBERT N
4341 NW 19TH ST
APT. 8
LAUDERHILL, FL 33313 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KUBAYANDA, GILBERT
Address: 4341 NW 19TH ST, APT 8
City-St-Zip: LAUDERHILL, FL 33313 US

Title: SD ( ) Delete
Name: FIGUEROA, JOAN
Address: 20515 W CAROUSEL CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33434

Title: TD ( ) Delete
Name: COOMSON, JOSEPH
Address: 16431 NW 17 CT
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GILBERT KUBAYANDA PD 11/03/2004
Electronic Signature of Signing Officer or Director — Date