

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N93000004665

FILED
Oct 26, 2004
Secretary of State**Entity Name:** CHURCH OF ALPHA AND OMEGA HOUSE OF PRAYER FOR ALL THE PEOPLE OF GOD INC.**Current Principal Place of Business:**18800 N.W. 2ND AVE.
ROOM 207
MIAMI, FL 33269**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 693118
MIAMI, FL 332690118**New Mailing Address:****FEI Number:** 65-0445356 **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:**RIDORE, MOLIERE PASTOR
3500 SW 174TH WAY
MIRAMAR, FL 33029 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: RIDORE, MOLIERE
Address: 3500 SW 174 WAY
City-St-Zip: MIRAMAR, FL 33029**Title:** TVD () Delete
Name: RIDORE, YOLETTE
Address: 3500 SW 174TH WAY
City-St-Zip: MIRAMAR, FL 33029**Title:** S () Delete
Name: CHARLES, ESTHER
Address: 6781 MEADE ST
City-St-Zip: HOLLYWOOD, FL**Title:** ST () Delete
Name: CHARLES, CHANTAL
Address: 6781 MEADE ST
City-St-Zip: HOLLYWOOD, FL**Title:** T () Delete
Name: RIDORE, RACHEL
Address: 425 NW 210 STREET, BLDG. 7 #102
City-St-Zip: MIAMI, FL 33169**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:
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City-St-Zip:**Title:** () Change () Addition
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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: YOLETTE RIDORE

TVD

10/26/2004

Electronic Signature of Signing Officer or Director_____
Date