PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT (95-97)

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

97 FEB 17 PM 4:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000005935

1. Corporation Name

SKYBOUND MINISTRIES, INC.
5728 Main Street
New Port Richey, Florida 34652

Principal Place of Business

SKYBOUND MINISTRIES, INC.
5728 Main Street
New Port Richey, Florida 34652

Mailing Address

SAME

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable

5347 Main Street
Suite, Apt. #, etc.
#203
City & State
New Port Richey, Florida
Zip
34652
Country
Pasco

3. New Mailing Address, If Applicable

5347 Main Street
Suite, Apt. #, etc.
#203
City & State
New Port Richey, Fl.
Zip
34652
Country
Pasco

4. Date Incorporated or Qualified To Do Business in Florida

November 2, 1993

5. FEI Number

59-3209628

☐ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED [X] $8.75 Additional Fee required for a Certificate of Status

300002090959--5
-02/18/97--01110--004
****367.30 ****358.75

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City/State/Zip
Pres/ Dir	Roberto Arevalo - Araujo	5540 Clipper Court	New Port Richey, Fl 34652
V.P./ Dir	Jeanne Oleson	3975 Orchard Hill Circle	Palm Harbor, Fl 34684
D/Sec/ Treas	Tony Abouhauna	7307 Fullerton Court	New Port Richey, Fl 34655
Dir	Dawn Turek	3039 Village Park Drive	Melbourne, Fl 32934

REINSTATEMENT 95-97

8. Name and Address of Current Registered Agent

Daniel P. Rock
5728 Main Street
New Port Richey, Florida 34652

9. Name and Address of New Registered Agent

Name
Roberto Arevalo -Araijo
Street Address (P.O. Box Number is Not Acceptable)
5347 Main Street
Suite, Apt. #, Etc.
#203
City
New Port Richey
State
FL
Zip Code
34652

2/17/97

CR2E040 (12/95)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent
REGISTERED AGENT MUST SIGN

Date February 13, 1997

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No [XX]

(See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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