

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

02 APR 25 AM 9:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N94000001398

1. Corporation Name

THE HEART OF A SERVANT, INC.

2. Principal Office Address

6144 NW 11th ST.

Suite, Apt. #, etc.

City & State

SUNRISE, FL.

Zip

33313

Country

USA.

3. Mailing Office Address

6144 NW 1247 NW 55th Ave

Suite, Apt. #, etc.

City & State

LAUDERHILL, FL.

Zip

33313

Country

USA

REINSTATEMENT 99-02

400005451304--5

-05/06/02--01002--024

\*\*\*\*420.00 \*\*\*\*420.00

4. Date Incorporated or Qualified  
To Do Business in Florida

3/17/1994.

5. FEI Number

N/A

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

HAYDEN MARSHALL.

Street Address (P.O. Box Number is Not Acceptable)

1247 NW 55th Ave.

Suite, Apt. #, Etc.

City

LAUDERHILL.

State

FL

Zip Code

33313

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Hayden C. Marshall

REGISTERED AGENT MUST SIGN

Date

4/21/02

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

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip       |
|--------|--------------------------------------|---|--------------------------|
| PD     | MARSHALL, HAYDEN                     | 1247 NW 55th Ave<br>LAUDERHILL, FL 33313          | LAUDERHILL, FL 33313     |
| VD     | MARSHALL, SHERRIE                    | 1247 NW 55th Ave                                  | LAUDERHILL, FL 33313     |
| TD     | JOHNSON, BESSIE                      | 680 CARVER Dr.                                    | LAKE WALES, FL 33853     |
| SD     | DOUGLAS, JENNIFER                    | Po Box 190702                                     | Ft. LAUDERDALE, FL 33319 |
| D      | JOHNSON, DARIUS.                     | 6146 NW 11th St.                                  | SUNRISE, FL 33313        |

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hayden C. Marshall

HAYDEN C. MARSHALL

Date

4/21/02

Daytime Phone #

(954)

536-2645

CR2E081 (9/01)