PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JAN 31 AM 8:21

DOCUMENT # N94000002981

1. Corporation Name

FIRE STARTER MINISTRIES, Inc.

REINSTATEMENT 00-05

2. Principal Office Address	3. Mailing Office Address
1209 Greenwood Ave	1209 Greenwood Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: LeHigh Acres	City & State: LeHigh Acres
Zip: 33972 Country: USA	Zip: 33972 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 6/13/1994

5. FEI Number: 65-0519705 ☐ 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: RAYMOND T. BEZARES 600046084485
U27077O5--U1029--002 **551 25

Street Address (P.O. Box Number is Not Acceptable): 1209 Greenwood Ave

Suite, Apt. #, Etc.

City: LeHigh Acres State: FL Zip Code: 33972

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: Raymond T Bz Date: 1/24/05
REGISTERED AGENT MUST SIGN

CR2E081 (01/05)

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	RAYMOND T. BEZARES	1209 Greenwood Ave	LeHigh Acres, FL 33972
D	MARCI J. BEZARES	1209 Greenwood Ave	LeHigh Acres FL 33972
D	AKERS, ROBERT N.	211 FIRESIDE CT	LeHigh Acres FL 33936
D	BROWN, SALLY	2213 GARDENIA WAY	LeHigh Acres FL 33973

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: Raymond T Bz RAYMOND T. BEZARES 1/24/05 239 936-3216
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #