

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
09 MAY -7 PM 2:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N9H00000DH741

1. Corporation Name  
Eglise Evangelique Baptiste  
Philadelphia, INC. OR  
Philadelphia Ev. Baptist Church, Inc.

100155622581  
05/07/09--01011--024 \*\*358.75

2. Principal Office Address - No P.O. Box #  
1000 N.W. 111 Street  
Suite, Apt. #, etc.

3. Mailing Office Address  
1000 N.W. 111 Street  
Suite, Apt. #, etc.

**REINSTATEMENT** 07-09

City & State  
Miami, FL  
Zip Country  
33168 U.S.

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Miami, FL  
Zip Country  
33168 U.S.

4. Date Incorporated or Qualified To Do Business in Florida  
5. FEI Number 65-0501261 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  
Amos Jean  
Street Address (P.O. Box Number is Not Acceptable)  
14601 N.W. 5th Avenue  
Suite, Apt. #, Etc.  
City State Zip Code  
Miami FL 33168

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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 [Signature] Date 5/4/09  
REGISTERED AGENT MUST SIGN

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	Florestal, Leonel	1130 N.W. 116 Ter.	Miami FL 33168
D	Joseph, Leonel	1035 N.W. 126 Street	Miami FL 33168
D	Fernando, Manoly	15041 South River Dr	Miami FL 33167
D	Bernida J. Elius	4201 Adams Street	Hollywood Hills, FL 33021
D	Chrisner Elius	4201 Adams Street	Hollywood Hills, FL 33021
P	Amos Jean	14601 N.W. 5th Aven	Miami FL 33168

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 contained in Chapter 119, 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] Amos Jean 5/4/09 (305) 773-2192  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #