

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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2006 OCT 16 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N95000005015**

1. Corporation Name

Eglise Baptiste Centrale Haitienne

2. Principal Office Address

116 N.E 24th St

Suite, Apt. #, etc.

N/A

City & State

Wilton Manors, FL

Zip

33305

Country

U.S

3. Mailing Office Address

Same

Suite, Apt. #, etc.

N/A

City & State

Same

Zip

Same

Country

Same

4. Date Incorporated or Qualified
To Do Business in Florida

10-23-1995

5. FEI Number

65-0505651

Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

08/61/06 90001 01970.00

CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

George A. Valeus

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

4360 N. W 4th Street

Suite, Apt. #, Etc.

Plantation

State

FL

Zip Code

33317

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 **10-10-06**

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/M	George A. Valeus	4360 N. W 4th St.	Plantation, FL 33317
S	Marie L. Silin	3300 Jackson Blvd.	Fort Lauderdale, FL 33312
M	Sherilyn Valeus	4360 N. W 4th St.	Plantation, FL 33317

REINSTATEMENT

De B 10/23/06

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] **George A. Valeus**

10/10/06

954-864-8902

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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**Eglise Baptiste Centrale Haïtienne
116 N.E 24TH Street
Wilton Manors, Florida 33305**

Un Dieu

Une Nation

Une Eglise

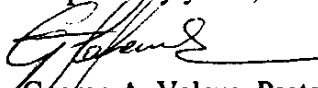
To: FLORIDA DEPARTMENT OF STATE
From: EGLISE BAPTISTE CENTRALE HAITIENNE
Date: October 11, 2006
Subject: Reinstatement Application
Reference: Document # N95000005015

Dear Sir / Madam:

The purpose of this note is to certify that the annual report for this not for profit corporation was indeed filed and submitted with the required filing fees on time. However, the report was mistakenly gone out unsigned.

Recently we received a notice of intent to dissolve, immediately I called the department in disbelieve and to my surprise I leaned there was a letter mailed out but I did not receive such letter. If I did, it would have been taken care of right away. I therefore, now submitted a signed reinstatement application as requested and call upon you to reinstate the organization to its original status.

Respectfully yours,


George A. Valeus, Pastor