## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N96000005882

FILED May 18, 2005 Secretary of State

Entity Name: DELIVERANCE RESTORATION AND MIRACLE MINISTRIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

541 SW 113TH AVENUE 7680 PEMBROKE ROAD PEMBROKE PINES, FL 33025 US MIRAMAR, FL 33023

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 381677 3622 SW 167TH TERRACE MIAMI, FL 33238 MIRAMAR, FL 33027

FEI Number: 65-0710739 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

HALL, ERROL D REV HALL, ERROL D SR 410 N.E. 180TH DRIVE 3622 SW 167TH TERRACE N.M.B., FL 33162 MIRAMAR, FL 33027

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: REV. DR. ERROL D. HALL, SR. 05/18/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PSD () Delete (X) Change ( ) Addition HALL, ERROL D REV. HALL, ERROL D SR. Name:

Name: 9225 N. MIAMI AVENUE Address: 3622 SW 167TH TERRACE Address: City-St-Zip: MIAMI SHORES, FL 33150 City-St-Zip: MIRAMAR, FL 33027 US

(X) Change ( ) Addition Title: () Delete Title:

GUTHRIE, ALBERT REV. Name: HALL, KAREN M Name:

Address: 9225 N. MIAMI AVENUE Address: 3622 SW 167TH TERRACE City-St-Zip: MIAMI SHORES, FL 33150 City-St-Zip: MIRAMAR, FL 33027 US

Title: VD. () Delete Title: SEC (X) Change ( ) Addition

HALL, KAREN BROWN, MARSHA D Name: Name: 9225 N. MIAMI AVENUE 2729 NW 200 TERRACE Address: Address: City-St-Zip: MIAMI SHORES, FL 33150 City-St-Zip: MIAMI, FL 33056 US

Title: (X) Delete Title: () Change () Addition

SHAW, JOAN Name: 9225 N. MIAMI AVENUE Address: Address: City-St-Zip: MIAMI SHORES, FL 33150 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REV. DR. ERROL D. HALL, SR. Ρ 05/18/2005