PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 DEC -4 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000006300

1. Corporation Name

CHRISTIAN BAPTISTE CHURCH OF CANAAN, INC.

Principal Place of Business	Mailing Address
274 NE 59 STREET MIAMI FL 33138	274 NE 59 STREET MIAMI FL 33138

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 98

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.: 274 NE 59 St.	Suite, Apt. #, etc.: 213 NE 10th St
City & State: Florida	City & State: MIAMI Shores FL
Zip: 33138 Country: USA	Zip: 33161 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/11/1996

5. FEI Number: 65-0743204 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	DESENTANT, JOSEPH	274 N.E. 59 STREET	MIAMI FL 33138
V	CHARLES, ESPERT L	274 NE 59 STREET	MIAMI FL 33138
T	JOSEPH, OSLER	274 NE 59 STREET	MIAMI FL 33138
S	JOSEPH, MARIE C	274 NE 59 STREET	MIAMI FL 33138
T	BERGEMAN, ADRIEN	741 N.E. 142 STREET	MIAMI FL 33161
T	SALVADOR, ULRICK	175 N.W. 75 STREET	MIAMI FL 33150

8. Name and Address of Current Registered Agent

THOMAS, REPHA
4115 NE 7 AVE.
MIAMI FL 33161

9. Name and Address of New Registered Agent

Name: Desentant Joseph
Street Address (P.O. Box Number is Not Acceptable): 274 NE 59 st
Suite, Apt. #, Etc.:
City: Miami. FLA. 33161 State: FL Zip Code:

CR2E040 (9/98)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Desentant Joseph — SIGNATURE REQUIRED — REGISTERED AGENT MUST SIGN
Date: 11-17-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☑

100002706541--5
-12/03/98 00 INTANGIBLE TAX 013
****236.25 ****236.25

(See other side for information.)

12. 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: Desentant Joseph — 11-17-98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #