

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

10 MAR 30 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N97000001818

1. Corporation Name

PEARLY GATE 7th DAY CHURCH OF JESUS CHRIST,
INC.

200173686952
03/30/10--01028--006 **358.75

200173686952
03/30/10--01028--007 **8.75

2. Principal Office Address - No P.O. Box #

3465 NW 43rd PLACE

Suite, Apt. #, etc.

3. Mailing Office Address

3465 NW 43rd PLACE

Suite, Apt. #, etc.

City & State

FT LAUDERDALE, FL

City & State

FT LAUDERDALE, FL

Zip

33309

Country

USA

Zip

33309

Country

USA

REINSTATEMENT 08-10
CRZE08T (11/09)

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0739924

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ ☐

\$8.75 Additional Fee required
for a Certificate of Status

☐ 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.

7. Name and Address of Current Registered Agent

Name

SMITH, VENARD

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

3465 NW 43rd PLACE

Suite, Apt. #, Etc.

City

FT LAUDERDALE

State

FL

Zip Code

33309

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

Venard Smith

REGISTERED AGENT MUST SIGN

Date

3/15/10

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
PD	SMITH, VENARD	3465 NW 43rd PLACE	FT LAUDERDALE, FL 33309
VS	SMITH, DAPHNE	3465 NW 43rd place	FT LAUDERDALE, FL 33309
TD	DIXON, MAXINE	1161 NW 50th AVE.	LAUDERHILL, FL 33313
D	THOMAS, ROSE	1061 NW 75th AVE.	SUNRISE, FL 33313

3/31

10. E-mail Address: nelson4699@netzero.com

(To be used for future annual report notification)

11. 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. I further certify, 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:

Venard Smith

Pres./Agent

3/15/10

954-731-8103

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #