

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 OCT -3 PM 12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300023546003
10/03/03--01068--006 **70.00

DOCUMENT # N97000001993

1. Corporation Name

AMBASSADORS FOR CHRIST N.D., INC.

2. Principal Office Address

12110 N.E. MIAMI COURT

Suite, Apt. #, etc.

3. Mailing Office Address

12110 N.E. MIAMI COURT

Suite, Apt. #, etc.

City & State

NORTH MIAMI, FL.

City & State

NORTH MIAMI, FL.

Zip

33161-5354

Country

USA

Zip

33161-5354

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

04/07/1997

5. FEI Number

592438442

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

JERRY L. WIMBERLY

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

12110 N.E. MIAMI COURT

Suite, Apt. #, Etc.

City

NORTH MIAMI

State

FL

Zip Code

33161-5354

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

[Handwritten Signature]

REGISTERED AGENT MUST SIGN

Date 10/01/2003

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 |
|--------|--------------------------------------|---|-----------------------------|
| P | JERRY L. WIMBERLY | 12110 NE MIAMI COURT | NORTH MIAMI, FL. 33161-5354 |
| V | JAMES J. BROWN | 1101 NW 139 STREET | MIAMI, FL. 33168 |
| S | GLADYS V. BROWN | 1101 NW 139 STREET | MIAMI, FL. 33168 |
| T | BERNICE WIMBERLY | 12110 NE MIAMI COURT | NORTH MIAMI, FL. 33161-5354 |
| | | | |
| | | | |

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 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:

[Handwritten Signature]

JERRY L. WIMBERLY

10/01/2003

Cell: (305) 776-5249

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

[Handwritten initials] 10/16

CR2003 (10/02)

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

Ambassadors for Christ N.D., Inc.
c/o Jerry L. Wimberly
12110 NE Miami Court
North Miami, FL 33161-5354

~~Date: October 1, 2003~~

Re: Reinstatement Fee

To: Whom it concern

I'm requesting a waiver of the reinstatement fee for these two incorporation because we didn't receive the correspondence to inform us of the status due to a change of address.

Ambassadors for Christ N.D., Inc.
Document # **N97000001993** / FIE # **592438442**

Ambassadors for Christ Family Enhancement, Inc.
Document # **N98000003538** / FIE # **311618715**.

Thanks.



Jerry L. Wimberly
President