PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION Sandra B. Mortham **FOR** DOCUMENT # 1000007700 CORPORATIONS

1. Corporation Name NEW BEGINNINGS DEVELOPMENT CORPORATION 99 JUL - 9 AM H: 48 Principal Place of Business 2900 18th AVE SO. ST. Petersburg, FL. 33713 REINSTATEMENT 🗆 🤉 If above addresses are incorrect in any way, line through incorrect information and enter correction below 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida Suite, Apl #, etc Suite, Apt #, etc. 5. FEI Number 3472585 Applied For City & State City & State Not Applicable CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required Žiρ Zin Country Country 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Title(s) Officer and/or Director
(Do NOT Use Post Office Box Numbers) City / State / Zip Delrick Baker ST. Peters bry FL. 33712 7533 Queensboro Ave So. Keith Young 2608 4th St. So. ST. Petusbry, FL. 33705 57. Petussung Fl. 33712 1860 - Lake word DR. So. St Pekisbury, PL 35705 Rodnes Bennett 658 60' Are So 1) 07,/22/99---01097---008--****297.50 ****297.50 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Today Bennett Street Address (P.O. Box Number is Not Acceptable) 658 60th AVC 50. Louis D. Brown JR. 7900 18Th Ave 50. Suite, Apt #, Etc Si. Petersburg FL. 337/3 Signature of Registered Agent _ 12 REGISTERED AGENT MUST SIGN 11. This corporation owes or has paid the current year (See other side for information No 🔯 on intangible tax.) Intangible Personal Property tax due June 30. Yes 🗀 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 we 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. 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 of 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)(ii), F.S. The information is 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)(ii), F.S. The information is 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)(ii), F.S. The information is 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)(ii), F.S. The information is the corporation is the corporation of the corporation is the corporation of the corporation is the corporation of the corporation of the corporation is the corporation of the corporation of the corporation of the corporation is the corporation of the co on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rodney Bennett