2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000003219

Entity Name: TABERNACLE OF GOD, CHURCH, INC.

FILED Nov 11, 2005 Secretary of State

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

500 GULF STREAM BLVD. 500 GULF STREAM BLVD.

DELRAY BEACH, FL 33483

DELRAY BEACH, FL 33483 US

Current Mailing Address: New Mailing Address:

2488 W LAKE IDA ROAD
DELRAY BEACH, FL 33445 US
5470 COLBRIGHT ROAD
LAKE WORTH, FL 33467 US

FEI Number: 65-0759193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

VALCENA, PIERRE N.

2488 W LAKE IDA RD

DELRAY BEACH, FL 33445 US

VALCENA, PIERRE N

5470 COLBRIGHT ROAD

LAKE WORTH, FL 33467 US

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: PIERRE N. VALCENA 11/11/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 VALCENA, PIERRE N
 Name:
 VALCENA, PIERRE N

 Address:
 2488 W LAKE IDA RD
 Address:
 5470 COLBRIGHT ROAD

Address: 2488 W LAKE IDA RD Address: 5470 COLBRIGHT ROAD
City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: LAKE WORTH, FL 33467 US

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

 Name:
 YNOCEL, ELIE
 Name:
 VALCENA, LAURETTE M

 Address:
 9351 LAUREL GREEN
 Address:
 5470 COLBRIGHT ROAD

City-St-Zip: BOYNTON BEACH, FL 33433 City-St-Zip: LAKE WORTH, FL 33467 US

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

Name:VALCENA, LAURETTEName:VALCENA, VALMIRE LAddress:2488 W. LAKE IDA ROADAddress:5470 COLBRIGHT ROADCity-St-Zip:DELRAY BEACH, FL 33445City-St-Zip:LAKE WORTH, FL 33467 US

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

Name: DESSAINT, ALAIN Name: SAINTE, KIVENS

Address: 523 DAVIS ROAD Address: 5700 WEST ATLANTIC AVENUE, APT 103
City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: DELRAY BEACH, FL 33484 US

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: PIERRE N. VALCENA P 11/11/2005