2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000007191

FILED Sep 08, 2006 Secretary of State

Entity Name: CIRCLE OF LIGHT METROPOLITAN COMMUNITY CHURCH MIAMI, INC.

Current Principal Place of Business: New Principal Place of Business: 2100 WASHINGTON AVENUE MIAMI BEACH, FL 331393233 **Current Mailing Address: New Mailing Address:** P.O. BOX 399117 MIAMI BEACH, FL 332399117 FEI Number Applied For () FEI Number Not Applicable (X) 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: CRUZ, CARLOS CRUZ, CARLOS 1801 SOUTH TREASURE DR. #321 12799 NW 18 MANOR PEMBROKE PINES, FL 33028 NORTH BAY VILLAGE, FL 33141 US 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: CARLOS CRUZ 09/08/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SKAGGS, ROBERT SKAGGS, ROBERT Name: Name: 1919 BAY DR Address: 6323 SW 42ND TERR Address: City-St-Zip: MIAMI, FL 33141 City-St-Zip: SOUTH MIAMI, FL 33155 Title: SD Title: () Delete () Change () Addition Name: SLACK, BARRY Name: Address: 3550 AVOLADO AVE Address: City-St-Zip: MIAMI, FL 33133 City-St-Zip: Title: () Delete Title: () Change () Addition TAULE, GEORGE Name: Name: 4101 SW 62ND AVE Address: Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip: Title: PD () Delete Title: PD (X) Change () Addition CRUZ, CARLOS Name: CRUZ, CARLOS Name: 1801 SOUTH TREASURE DR #321 12799 NW 18 MANOR Address: Address: City-St-Zip: NORTH BAY VILLAGE, FL 33141 City-St-Zip: PEMBROKE PINES, FL 33028 Title: () Delete Title: () Change (X) Addition SLIMAN, JASON Name: Name: 1500 BAY RD #1422 Address: Address: City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GEORGE TAULE D 09/08/2006