PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

02883

FILED
03 MAY 21 AM 7:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000000836

1. Corporation Name
Daytona Beach Pasadena Institute of Divine Metaphysical Research, Inc.

2. Principal Office Address		**3.** Mailing Office Address	
962 Millard Court		962 Millard Court	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Daytona Beach, FL.		Daytona Beach, FL.	
Zip: 32117	Country:	Zip: 32117	Country:

000019679420
05/21/03--01047--014 **131.75

4. Date Incorporated or Qualified To Do Business in Florida: 02/12/98

5. FEI Number: 59 3492949 ☐ 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: Dr. Bettie F. Bailey

Street Address (P.O. Box Number is Not Acceptable): 962 Millard Court

Suite, Apt. #, Etc.:

City: Daytona Beach | State: FL | Zip Code: 32117

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: Dr. Bettie F. Bailey — REGISTERED AGENT MUST SIGN — Date: 05/13/03

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/D	Dr. Lupe L. Kinley	1530 Decatur Avenue	Holly Hill, FL. 32117
P/D	Dr. Rodney B. Kinley	1530 Decatur Avenue	Holly Hill, FL. 32117
V	Dr. Retha R. Blue	1130 Lewis Drive	Holly Hill, FL. 32117
S/T	Dr. Bettie F. Bailey	962 Millard Court	Daytona Beach, FL. 32117

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: Dr. Bettie F. Bailey — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 05/13/03 (Date) — (386) 252-6838 (Daytime Phone #)

jp 5/27

Daytona Beach
Pasadena Institute of Divine
Metaphysical Research, Inc.

P.O. Box 1504
Daytona Beach, Florida 32115

May 13, 2003

Department of State
Divisions of Corporation
P/O Box 6327
Tallahassee, FL. 32314

Re: Reinstatement of Document # N98000000836

To Whom It May Concern:

This letter is to inform you that we never received the UBR form for the year 2002 and I had put in a change of address in 2001. I'm asking that we be reinstated and that the reinstatement fee of $175.00 be waived.

Enclosed is a check for $131.25 for the years 2002 and 2003. This is the filing fee for non -profit organizations of $61.25, for each year, plus $8.75 for certificate of status. Please send to the following address:

Dr. Bettie F. Bailey
962 Millard Court
Daytona Beach, FL. 32117

Thank you,

Dr. Bettie F. Bailey,
Secretary/Treasurer