

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 OCT 22 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000001145

1. Corporation Name

WORDS OF LIFE, INC.

Principal Place of Business

Mailing Address

2901 W. OAKLAND PARK BLVD., UNIT NO. B-19
OAKLAND PARK FL 33311

2901 W. OAKLAND PARK BLVD., UNIT NO. B-19
OAKLAND PARK FL 33311

OUT OF BUSINESS
NO LONGER AT ABOVE ADDRESS

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

2961 NW 68th Lane

2961 NW 68th Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

MARGATE FLORIDA

MARGATE FLORIDA

City & State

City & State

MARGATE FLORIDA

MARGATE FLORIDA

Zip 33063 Country USA

Zip 33063 Country USA

4. Date Incorporated or Qualified
To Do Business In Florida

02/25/1998

5. FEI Number

☒ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	OZTURK, JAMES C	2901 W. OAKLAND PARK BLVD., UNIT	OAKLAND PARK FL 33311
D	EASTON, EMILY	4333 CORAL SPRINGS DRIVE	CORAL SPRINGS FL
D	KEHAYOPULOS, FERUSE ROSE	3170 HOLIDAY SPRINGS BLVD.	MARGATE FL 33363

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-11/02/99--01104--015
*****61.25 *****61.25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

OZTURK, JAMES C
2901 W. OAKLAND PARK BLVD., UNIT NO. B-19
OAKLAND PARK FL 33311

Name OZTURK JAMES C
Street Address (P.O. Box Number is Not Acceptable)
2961 NW 68th Lane
Suite, Apt. #, Etc.
City MARGATE State FL Zip Code 33063

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

James C. Ozturk
REGISTERED AGENT MUST SIGN

Date 10/18/99

11. 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:

James C. Ozturk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/18/99
Date

954
345-1569
Daytime Phone #

10/19/99 (2)

To whom it may concern
: Dear Sir / MADAM

I am writing this letter to notify
you that I did not receive any
prior notice to file the annual report
Please reactivate my nonprofit corporation
I am enclosing the \$61.25 annual
report file fee.

Thank you in advance.

James Ozturk
for Words of Life
N98000001145