


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM, APPROVAL AND FILED

05 MAY 25 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000002869

1. Corporation Name

NEW PHILADELPHIA BAPTIST CHURCH, INC.,

2. Principal Office Address 8640 NW 22nd Avenue Miami, FL 33147 Suite, Apt. #, etc.		3. Mailing Office Address 8640 NW 22nd Avenue Suite, Apt. #, etc.	
City & State Miami, Florida 33147		City & State Miami, Florida	
Zip 33147	Country USA	Zip 33147	Country USA

REINSTATEMENT

AD-05

4. Date Incorporated or Qualified To Do Business in Florida May 18, 1998	
5. FEI Number 65-0853735	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name Rickie Robinson	000055336330
Street Address (P.O. Box Number is Not Acceptable) 8640 NW 22nd Avenue	05/25/05--01058--002 **\$50.00
Suite, Apt. #, Etc.	000055336330
	05/25/05--01058--003 **\$1.25
City Miami,	State FL
	Zip Code 33147

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 *Rickie Robinson* Date May 17, 2005
REGISTERED AGENT MUST SIGN

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
Pres.	Richie Robinson	8640 NW 22nd Avenue	Miami, Fl 33147
Sect.	Willa J. Kaigler	3410 NW 177 Terrace	Miami, Fl 33056
Treas.	Jeannie Harris	439 NW 9th Street	Miami, Fl 33136
Dir.	Elgen Pigott	7825 NW 5th Ct. Apt. #4	Miami, Fl 33150
Dir.	Marguerite Lane	19223 NW 36th Avenue	Miami, Fl 33055

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: *Rickie Robinson* Date 5/17/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (01/05)