

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 JAN 14 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000002982

1. Corporation Name

LOVE AND HOLINESS MINISTRIES, INC.

2. Principal Office Address

7961 SW 196 Terrace

3. Mailing Office Address

7961 SW 196 Terrace

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

N/A

City & State

Miami, FL

City & State

Miami, FL

Zip

33189

Country

USA

Zip

33189

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 5/26/1998

5. FEI Number

65-0840319

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

Hurtado, Miguel A.

Street Address (P.O. Box Number is Not Acceptable)

7961 SW 196 Terrace

Suite, Apt. #, Etc.

N/A

City

Miami

State

FL

Zip Code

33189

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

REGISTERED AGENT MUST SIGN

Date 1/10/2003

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
PD	Hurtado, Miguel A.	7961 SW-196 Terrace	Miami, FL-33189
VD	Hurtado, Ynes A.	7961 SW 196 Terrace	Miami, FL 33189
SD	Valdes, Farah C.	6113 SW 147 Place Circle	Miami, FL 33193

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:

Miguel A. Hurtado

1/10/2003 (305)310-9074

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000002982

1. Corporation Name

LOVE AND HOLINESS MINISTRIES, INC.

2. Principal Office Address

7961 SW 196 Terrace

Suite, Apt. #, etc.

N/A

City & State

Miami, FL

Zip

33189

Country

USA

3. Mailing Office Address

7961 SW 196 Terrace

Suite, Apt. #, etc.

N/A

City & State

Miami, FL

Zip

33189

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida: 5/26/1998

5. FEI Number

65-0840319

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

Hurtado, Miguel A.

Street Address (P.O. Box Number is Not Acceptable)

7961 SW 196 Terrace

Suite, Apt. #, Etc.

N/A

City

Miami

State

FL

Zip Code

33189

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

REGISTERED AGENT MUST SIGN

Date 1/10/2003

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
PD	Hurtado, Miguel A.	7961 SW 196 Terrace	Miami, FL 33189
VD	Hurtado, Ynes A.	7961 SW 196 Terrace	Miami, FL 33189
SD	Valdes, Farah C.	6113 SW 147 Place Circle	Miami, FL 33193

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:

Miguel A. Hurtado

1/10/2003 (305)310-9074

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)



7961 SW 196 Terrace • Miami, FL 33189 • Telephone (305)310-9074 • mhurtado56@hotmail.com

January 10, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: REINSTATEMENT OF CORPORATION
DOCUMENT # N98000002982

Gentleman:

Reviewing our 2002 records I noticed that we never received the corporation renewal form that we usually get from your office every year. I contacted your offices immediately and they instructed me to complete the attached form and send it back to you with my payment for 2002 and 2003.

I am also requesting to have THE APPLICABLE PENALTIES WAIVED since I never received the renewal form from you.

Enclosed please find my check # 1400 in the amount of \$ 131.25, this amount represents \$.61.25 for year 2002, \$.61.25 for year 2003 and additional \$.8.75 for the Certificate of Status.

I thank you in advance for your help with this matter.

Respectfully,


Miguel A. Hurtado
President