PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.







FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N98000004235

1. Corporation Name

LOVE OUTREACH, INC.

Principal	Place	of	Business

Mailing Address

17221 N.W. 41ST AVENUE CAROL CITY FL 33055-4444

17221 N.W. 41ST AVENUE CAROL CITY FL 33055-4444

20/3/K

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

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If above addresses are incorrect in any way, line through incorrect information and enter correction below.											
New Principal Office Address, If Applicable 3. New Maili		ng Office Address, If Applicable		Date Incorporated or Qualified							
							To Do Business in Florida 07/20/1998				
Suite, Apt. #, etc. Suite, Apt. #,		Suite, Apt. #,	etc.			5. FEI Number	,	Applied For			
City 9 State		-	City & State	7			65-0852201				
City & State			Oily a state				Not Applicable				
Zip Country Z		Zip Cour		Country		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)											
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip			
PC	JOHNSON, OBBIE L			17221 NW 41ST AVE.				OPA LOCKA FL 33055			
VPD '	JOHNSON, MARY			17221 NW 41ST AVE.				OPA LOCKA FL 33055			
Đ.	EVANS, FRANCES			915 NW 1ST AVE.				MIAMI FL 33136			
SD	FLOWERS, MARY			2990 NW 65TH STREET				MIAMI FL 33142			
D .	SANDS, JOYCE			3430 NW 196TH LANE				OPA LOCKA FL 33056			
D	LOVÉ, EVA			14421 JEFFERSON ST.			RICHMOND HEAGHTS FL				
8. Name and Address of Current Registered Agent						Name and Address of New Registered Agent					
						Name		, -	-		
JOHNSON, OBBIE LEE						Street Address (P.O. Box Number is Not Acceptable)					
17221 N.W. 41ST AVENUE											
CAROL CITY FL 33055-4444					Suite, Apt. #, Etc.						
						City State Zip Code					
10. I, being	appointed the rec	istered agent of the abov	e named corpo	ration, am fa	amiliar with	n and accept the ob	ligations of Secti	on 607.0505, F.S.			
·		-									
Signature of Registered Agent Date 1//8/0/ REGISTERED AGENT MUST SIGN											
11. I certify	that I am an office	r or director or the receiv	er or trustee en	npowered to	execute th	his application as p	rovided for in cha	pter 607 or 617, F.S. I furth	er 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

n 11/8/01-305-181-12

Daytime Phone

Obbie Johnson 17221 Northwest 41st Avenue Miami, FL 33055

November 8, 2001

Ref: Love Outreach, Inc.

To whom it may concern,

I am writing about the renewal of the UBR Division of Corporations in which we never received the first are second document to be return and has just received the last one on October 25,2001. There is a mail problem in this area, please know that we are very sorry about this oversight.

Respectfully_yours,

Obbie Johnson (Pres.)

Love Outreach