## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE  Secretary of State  DIVISION OF CORPORATIONS	SECRETARY OF STATE DIVISION OF CORPORAFONS  03 OCT -8 PM 12: 14
DOCUMENT # N9900	000 \55 <u>5</u>	,
1. Corporation Name	201,500	emstatement -02-03
1. Corporation Name Cod's	Dominion Ministres	0.05
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2. Principal Office Address	3. Mailing Office Address	100023644861 10/08/0301040002 **131.25
1605. Cone Part	G V.O. BUX VIGU	10/08/0301040002 **131.25
Suite, Apt. #, etc.	Suite, Apt. #, etc.	·
kd ()	139x ec 14.	Date Incorporated or Qualified
City & State	City & State	To Do Business in Florida 3 12 1999
-Kay	5.	FEI Number Applied For
- Jay	Zio Country	5 9-1347 8 427   Not Applicable
Zip Country	6.	CEDTISIONTE DE CTATILE DECIDED SONS AGRICORAL PER REQUIRES
32210 0.5.	32203 0.2	for a Certificate of Status
7. Name and Address of Current Registered Agent		
Name	11	
Devone	Mackey	
Street Address (P.O. Box Number is No	* \ A	_
	ommenuea toh av	<u>ૄ</u>
Suite, Apt. #, Etc.		
034		Charles Contraction
city S 5 X		State Zip Code FL 339 CV
8. I, being appointed the registered agent of the above	re named corporation, am familiar with and accept the obligation	ions of section 607.0505 or 617.0503, F.S.  Date
Signature of	L La AKORH	/x/G/63 150
Registered Agent Registered Agent Registered Agent	GISTERED AGENT MUST SIGN	Date Nate
9. Names and Street Addresses of Each Officer and	/or Director (Florida nonprofit corporations must list at least 3	directors)
Namont	Cturet Address of Feeb	
Titles Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Titles Officers and/or Directors	Officer and/or Director	City / State / Zip
Officers and/or Directors	Officer and/or Director	City / State / Zip
Officers and/or Directors		city/State/Zip
Officers and/or Directors	Officer and/or Director	city/State/Zip
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Officers and/or Directors	Officer and/or Director	city/State/Zip  Lea Jax C 32854  Bhave Jax C 3206
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Officers and/or Directors  Pick Peronis M  Active Beverly Vern	Officer and/or Director	clity/State/Zip  rect are Jay = C32254  Tay = C32254  Tay = C32254  Tay = C32254
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Officers and/or Directors  Pick Peronis M  Active Beverly Vern	Officer and/or Director  Schey 2957 (-on many lackey 2957 Communal Adon 3750 Junia 8	pert are Jay (Corry)  Tay (Corry)  Jay (Corry)
Officers and/or Directors  Pice Control  Severy Jenn  10. I certify that I am an officer or director or the receive this reinstatement application, the reason for disson	officer and/or Director  Sivey 2957 (- On monitoring and a second and	ed for in chapter 607 or 617, F.S. I further certify that when filling equirements of section 607.0401 or 617.0401, F.S., that all fees
10. I certify that I am an officer or director or the receithis reinstatement application, the reason for disson owed by the corporation have been paid and the response of the corporation of the reason for disson owed by the corporation have been paid and the response of the corporation have been paid and th	officer and/or Director  Sivey 2957 (-00 -000)  Action	ed for in chapter 607 or 617, F.S. I further certify that when filling equirements of section 607.0401 or 617.0401, F.S., that all fees amption under section 119.07(3)(i), F.S. The information indicated
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10. I certify that I am an officer or director or the receit this reinstatement application, the reason for dissoured by the corporation have been paid and the ron this application is true and accurate, and my significant	officer and/or Director  Sivey 2957 (-00 -000)  Action	ed for in chapter 607 or 617, F.S. I further certify that when filling equirements of section 607.0401 or 617.0401, F.S., that all fees amption under section 119.07(3)(i), F.S. The information indicated
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