

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N99000002716

**FILED**  
**Oct 25, 2004**  
**Secretary of State****Entity Name:** HOSANNA WORSHIP CENTER, INC.**Current Principal Place of Business:**995 NE 124TH ST  
SUITE 200  
N. MIAMI, FL 33161**New Principal Place of Business:****Current Mailing Address:**995 NE 124TH ST  
SUITE 200  
N. MIAMI, FL 33161**New Mailing Address:**3401 WEST LAKES PLACE  
MIRAMAR, FL 33023**FEI Number:** 65-0915726      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:**SAINTUS, STEVE  
6510 SW 30TH STREET  
MIRAMAR, FL 33023      US**Name and Address of New Registered Agent:**LASSEGUE, MARIE C  
3401 WEST LAKES PLACE  
MIRAMAR, FL 33023      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARIE C LASSEGUE

10/25/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** D      ( ) Delete  
**Name:** SAINTUS, STEVE  
**Address:** 6510 SW 30TH STREET  
**City-St-Zip:** MIRAMAR, FL 33023**Title:** TD      ( ) Delete  
**Name:** LASSEGUE, MARIE C  
**Address:** 3401 W. LAKE PL.  
**City-St-Zip:** MIRAMAR, FL 33023**Title:** SD      ( ) Delete  
**Name:** CAYARD, ULRICK  
**Address:** 19704 HAMPTON DRIVE  
**City-St-Zip:** BOCA RATON, FL 33434**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIE C LASSEGUE

D

10/25/2004

Electronic Signature of Signing Officer or Director

Date