

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 DEC 15 AM 9:54

DOCUMENT # N99000005115
1. Corporation Name MIRACLE GOD MINISTRY, INC CHURCH
786 NW 14TH STREET
MIAMI FL 33136 • Ph 305-5459693

2. Principal Office Address <u>786 NW 14 STREET</u> Suite, Apt. #, etc.		3. Mailing Office Address <u>SAME</u> Suite, Apt. #, etc.	
City & State <u>MIAMI FL</u>		City & State	
Zip <u>33136</u>	Country <u>USA</u>	Zip	Country

REINSTATEMENT

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

7. Name and Address of Current Registered Agent	
Name <u>EZEKIEL WILLIAMS Rev. Overseer.</u>	
Street Address (P.O. Box Number is Not Acceptable) <u>786 NW 14 STREET</u>	
Suite, Apt. #, Etc.	
City <u>MIAMI</u>	State <u>FL</u>
	Zip Code <u>33136</u>

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 Reverend Ezekiel Williams, Overseer Date Wednesday Dec 13, 2000
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
<u>PRES</u> <u>Rev.</u>	<u>EZEKIEL WILLIAMS, Overseer</u>	<u>786 NW 14 ST</u>	<u>MIAMI FL 33136</u>
<u>DIR</u>	<u>HENRY FULLINGTON</u>	<u>7769 NW 9 AVENUE</u>	<u>MIAMI FL 33150</u>
<u>SEC</u>	<u>WILLIAM MCDONALD</u>	<u>243 NW 10 STREET</u>	<u>MIAMI FL 33136</u>
<u>TRES</u>	<u>DIR RICHARD REED</u>	<u>100 NW 12 ST</u>	<u>MIAMI FL 33136</u>
<u>DIR</u>	<u>JOHN DARKIN</u>	<u>1445 NW 2 AVENUE</u>	<u>MIAMI FL 33136</u>

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.
Rev. Ezekiel Williams, Overseer
SIGNATURE: EZEKIEL WILLIAMS, PRES Date 12/4/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2ED81 (9/99)