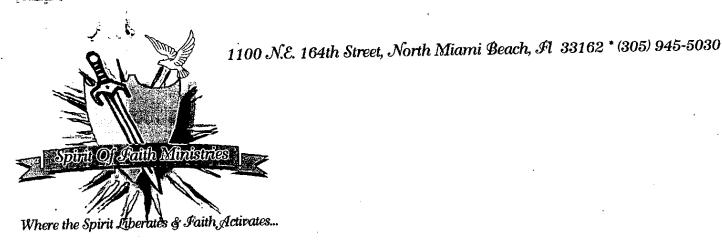
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.		
REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State VISION OF CORPORATIONS	03 FEB -4 AM II: 26 SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT # N99 000006363		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Spirit of Farth Community Development corp.		
Spring of the second		800011777758 02/04/0301031003 **131.25
2. Principal Office Address 1100 N.E. 164 ⁴ Street	3. Mailing Office Address 1100 N.E. 164th Street	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida To Do Business in Florida
City & State Worth Mianci Beach, FL	Voeth Many Beh, FC	5. FEI Number Applied For 0509 508 0 Not Applicable
S3162 Country	33162 Country U.S.	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Name Edward Tyrner		
Street Address (P.O. Box Number Is Not Acceptable) 4100 SW 153 TO TERROCE		
Suite, Apt. #, Etc.		
City Uiraman		State Zip Code 33027
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 1/31/03
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 Director	Street Address of Ea	ch City / State / Zip
PD Edward Tyrner	4760 SW 153	METERN Hipaman, FL 33027
VD Pepe Ramnath	15221 S.W. 46	n court Hiraman, FC 33027
TD Renee Wallace	3831 NW 175th	Street Miami, PC 33055
SD Kenneth Lewis	เล็กอร์ Nm เลร	Terr Opa-locka ITL 33054
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 filling 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 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. The information indicated 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

y 2/10/03



January 30, 2003

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

Spirit of Faith Community Development Corporation RE:

Dear Sir or Madam:

Please accept this letter as an official request to waive the reinstatement fee for the above referenced corporation. Our inactive status has just recently been brought to my attention by our treasurer, whom states she indeed forwarded the annual report with the \$61.25 fee on two occasions, as she did for Spirit of Faith Ministries, Inc.. After calling your office directly last week, I was told that your records show that payment was received but had to be returned because one of the directors didn't have an address listed. The young lady advised me to write this waiver request letter and mail the payments for 2002 and 2003. I am complying to her instructions and have added \$8.75 for a certificate of status.

Please feel free to contact me directly with any questions you may have regarding this issue.

Sincerely.

Pastor Artisa Turner

Work - 305-585-8182 Home - 954-538-1003

Edward & Anisa Turner - Senior Pastors