

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000032409

1. Entity Name
BRUCE ALLEN MINISTERIAL ENTERPRISES, INC.



FILED

05 OCT 13 PM 2:53

SECRET
FALL 2004
STATE
TOLSON

Principal Place of Business
10832 NAPLES CT SOUTH
JACKSONVILLE, FL 32218

Mailing Address
10832 NAPLES CT SOUTH
JACKSONVILLE, FL 32218

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10122005

REIN-P

CR2E098 (6/04)

4. FEI Number

20-0754973

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WORLDWIDE CORPORATE SERVICES, INC.
2780 E OAKLAND PARK BLVD
FT LAUDERDALE, FL 33306

7. Name and Address of New Registered Agent

Name A. Renita Allen

Street Address (P.O. Box Number is Not Acceptable)

10832 Naples Ct. S.

City Jacksonville, FL Zip Code 32218

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Bruce V. Allen

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10/12/05

FILE NOW!!! FEE IS \$750.00

After January 1, 2006, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE President ☐ Delete
NAME Bruce V. Allen JACK FL
STREET ADDRESS 10832 Naples Ct. S. 32218
CITY-ST-ZIP

TITLE Vice President ☐ Delete
NAME A. Renita Allen
STREET ADDRESS 10832 Naples Ct. S.
CITY-ST-ZIP Jacksonville, FL 32218

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Bruce V. Allen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/12/05

Date

(404) 924-0000

Daytime Phone #

October 12, 2005

To Whom It May Concern:

I had a phone conversation with Lula one of your employees she requested that I write this letter to inform you that I never received a rejection letter dated May 17 to make the necessary correction and return in 30 days. You have a \$150.00 on record already, please wave the reinstatement fee.

Thank you,

A handwritten signature in black ink, appearing to read 'Bruce V. Allen', with a stylized flourish at the end.

PASTOR BRUCE V. ALLEN