

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000035339

**FILED**  
**Aug 26, 2014**  
**Secretary of State**

**Entity Name:** CHRISTIANS CRUSADING FOR BETTER HOUSING, INC.

**Current Principal Place of Business:**

610 NW 183 ST  
SUITE 209  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

20000 N.W. 15TH AVE.  
MIAMI, FL 33169

**New Mailing Address:**

**FEI Number:** 20-2469978

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CASON, WILBERT TC  
20000 N.W. 15TH AVE.  
MIAMI, FL 33169 US

**Name and Address of New Registered Agent:**

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: WILBERT (TC )CASON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VT  
Name: CHATMAN-CASON, GLORIA  
Address: 20000 N.W. 15TH AVE.  
City-St-Zip: MIAMI, FL 33169

Title: D  
Name: CASON, WILBERT TC  
Address: 20000 N.W. 15TH AVE.  
City-St-Zip: MIAMI, FL 33169

Title: D  
Name: HOPKINS, TIAMARIO  
Address: 6940 N.W. 12TH COURT  
City-St-Zip: PLANTATION, FL 33313

Title: D  
Name: SMITH, ERICA  
Address: 52835-1 SANDRA DR  
City-St-Zip: FORT HOOD, TE 76544

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILBERT (TC ) CASON

Electronic Signature of Signing Officer or Director

PRES

08/26/2014

Date