

2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED

09 APR 24 PM 4:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000040001	
1. Entity Name ENGEDI WORSHIP GROUP INC.	

Principal Place of Business 1735 DEWEY ST #302 HOLLYWOOD, FL 33020	Mailing Address 1735 DEWEY ST #302 HOLLYWOOD, FL 33020
---	---

2. Principal Place of Business - No P.O. Box # 701 N.W. 210 STREET, Suite, Apt. #, etc. Bldg. 3-315, City & State MIAMI, FL. Zip 33169	3. Mailing Address 701 N.W. 210 STREET, Suite, Apt. #, etc. Bldg. 3-315, City & State MIAMI, FL. Zip 33169
---	---



03212009 REIN-P CR2E098 (1/07)

4. FEI Number APPLIED FOR 26-2460315	Applied For ☐ Not Applicable
--	--

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent SIERRA-MCKENZIE, DEBORAH D 1735 DEWEY ST #302 HOLLYWOOD, FL 33020	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 701 N.W. 210 STREET, Bldg. 3-315, City MIAMI FL Zip Code 33169
---	---

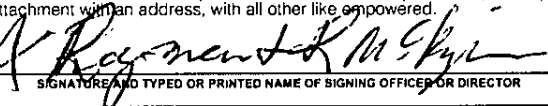
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE _____
--	--	------------

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
------------------------------------	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SIERRA-MCKENZIE, DEBORAH D 1735 DEWEY ST #302 HOLLYWOOD, FL 33020 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 701 N.W. 210 STREET, Bldg. 3-315, MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCKENZIE, RAYMOND R 1735 DEWEY ST #302 HOLLYWOOD, FL 33020 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 701 N.W. 210 STREET, Bldg. 3-315, MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 	4/21/09 786-285-8528
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

4/27/09