

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000041700

FILED
Oct 14, 2009
Secretary of State

Entity Name: RHEMA APOSTOLIC INTERNATIONAL NETWORK INC.

Current Principal Place of Business:

8241 S.W. 183RD STREET
VILLAGE OF PALLMETTO BAY, FL 33157 US

New Principal Place of Business:

Current Mailing Address:

8241 S.W. 183RD STREET
VILLAGE OF PALLMETTO BAY, FL 33157 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PYFROM, ANNESIA
14440 LINCOLN BLVD.
MIAMI, FL 33176 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: ANNESIA PYFROM

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MALONE, SR., CARLOS L
Address: 8241 S.W. 183RD STREET
City-St-Zip: VILLAGE OF PALLMETTO BAY, FL 33157 US

Title: TRES () Delete
Name: DAUGHTERY, DEENA
Address: 8241 S.W. 183RD STREET
City-St-Zip: VILLAGE OF PALLMETTO BAY, FL 33157 US

Title: SEC () Delete
Name: JOLLEY, LISA
Address: 8241 S.W. 183RD STREET
City-St-Zip: VILLAGE OF PALLMETTO BAY, FL 33157 US

Title: DIR () Delete
Name: MALONE, SR., CARLOS L
Address: 8241 S.W. 183RD STREET
City-St-Zip: VILLAGE OF PALLMETTO BAY, FL 33157 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CARLOS MALONE

PD

10/14/2009

Electronic Signature of Signing Officer or Director

Date