

**2017 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N08000010689

**FILED**  
**Mar 25, 2017**  
**Secretary of State**  
**CR8958708796**

**Entity Name:** LEVY MINISTRY INTERNATIONAL, INC.

**Current Principal Place of Business:**

318 BAKER DR.  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

318 BAKER DR.  
WEST PALM BEACH, FL 33409

**FEI Number: 26-4697470**

**Certificate of Status Desired: No**

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

LEVY, MILODER  
318 BAKER DR.  
WEST PALM BEACH, FL 33409 US

*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: MILODER LEVY**

**03/25/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            LEVY, MILODER  
Address        318 BAKER DR.  
City-State-Zip: WEST PALM BEACH FL 33409

Title            VP  
Name            ELIANCY, EMILE  
Address        1854 SUWANEE  
City-State-Zip: WEST PAM BEACH FL 33409

Title            COORDONATOR  
Name            BRUNY, JEAN  
Address        4650 NORTH CONGRESS AVENUE  
                  203  
City-State-Zip: WEST PALM BEACH FL 33407

Title            SECRETARY  
Name            PANDOL, ECLIDE  
Address        1055 SW PAAR DR  
City-State-Zip: PORT ST LUCIE FL 34953

Title            ASST. SECRETARY  
Name            ORIUS, ANGELIQUE  
Address        5865 CARIBBEAN BLVD  
                  601  
City-State-Zip: WEST PALM BEACH FL 33407

Title            TREASURER  
Name            RONY, RENEL  
Address        680 LUCERO DR  
City-State-Zip: PORT ST LUCIE FL 34983

Title            COUNSELOR  
Name            JEAN BAPTISTE, MARK  
Address        2244 RIDGEWOOD CIRCLE  
City-State-Zip: ROYAL PALM BEACH FL 33411

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

**SIGNATURE: MILODER LEVY**

**PRESIDENT**

**03/25/2017**

Electronic Signature of Signing Officer/Director Detail

Date