Organization ID # 0649413 State of origin

Commonwealth of Kentucky Filing fee \$190.00 Alison Lundergan Grimes, Secretary of S

0649413.09

Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 10/2/2017 3:33 PM Fee Receipt: \$190.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Reinstatement Application and Reinstatement Annual Report For the years 2012 through 2017

Exact organization name and principal office address HAITIAN TABERNACLE INCORPORATED 1122 LONGFIELD AVE

The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can

	filed online at <u>app.sos.ky.gov/ftsearch</u> or o downloaded from our website.	an be	
Registered Office Address	FEIN (Optional)	FEIN (Optional)	
HILIPPE ELD AVE KY 40215			
re (optional):	tax return as a disregarded	ht	
ist the name, address and title of all current office and to the principal office address. Corporations a	cers. All organizations must list at least one (1) officer, even in the case of a sole officer required to list a Secretary or other officer serving as records custodian	er. If not	
AGATHE GUSTAVE DUCLOT	-		
CHERY METELLUS			
ANDRE THEODORE	Marie-Jo Alexandre		
GUITNER HYACINTHE			
porations must have at least three (3) directors. A	Ill directors of the non-profit must be listed. If not specified, director addresses defaul	t to the principal	
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<u>e</u>			
states that the grounds for dissolution is of KRS 273.3181. Enclosed is a control of the below signed hereby authorized HAITIAN TABERNACLE INCORPO	on either did not exist or have been eliminated, and the entity's check in the amount of \$190.00, payable to Kentucky State Treas the Kentucky Department of Revenue to release any applicate DRATED to the Secretary of State, as required for reinstatement	name asurer. ole tax	
	re (optional): lame: ist the name, address and title of all current office ault to the principal office address. Corporations a AGATHE GUSTAVE DUCLOT CHERY METELLUS ANDRE THEODORE GUITNER HYACINTHE porations must have at least three (3) directors. A AGATHE GUSTAVE AND	Registered Office Address IILIPPE ELD AVE KY 40215 Identification apparent company's Kentucky tax return as a disregarder re (optional): Itame: Ist the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole office autit to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian AGATHE GUSTAVE DUCLOT CHERY METELLUS ANDRE THEODORE GUITNER HYACINTHE Dorations must have at least three (3) directors. All directors of the non-profit must be listed. If not specified, director addresses default the grounds for dissolution either did not exist or have been eliminated, and the entity's rest to fKRS 273.3181. Enclosed is a check in the amount of \$190.00, payable to Kentucky State Tree, the Haltian Tabernacle in the Incorporation of Power of Attorney with the Reinstatement Application.	



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

October 2, 2017

HAITIAN TABERNACLE INCORPORATED 1122 LONGFIELD AVE LOUISVILLE KY 40215

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **HAITIAN TABERNACLE INCORPORATED** is exempt from filing a Kentucky Corporation Income Tax Return pursuant to KRS 141.040, KRS 141.0401 and KRS 136.070. This exemption does not apply to any other taxes administered by the Commonwealth of Kentucky. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the corporation. This letter is valid for 30 days from the date of this letter.

Any changes in the corporation's articles of incorporation, by-laws, method of reporting, name or address, or ruling by the Internal Revenue Service must be reported to this office.

Sincerely,

Stephanie REVX219, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 Phone# (502) 564-2028 FAX# (502) 564-0058

Kentucky Secretary of State organization number 0649413

