

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98 \$61.25 (IF DISSOLVED), MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.

**FILED**  
**Oct 08 1998 8:00am**  
**Secretary of State**

0012957

**NONPROFIT CORPORATION ANNUAL REPORT 1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 700337**

**(9)**

1. Corporation Name

**BEREAN BAPTIST CHURCH, INC.**

Principal Place of Business

1016 NE 37 ST  
 OAKLAND PARK FL 33334  
 US

Mailing Address

1016 NE 37 ST  
 OAKLAND PARK FL 33334  
 US

2. Principal Place of Business

21 | 1016 N.E. 37 Street  
 Suite, Apt #, etc.  
 22 | Oakland Park, FL  
 City & State

2a Mailing Address

26 | 1016 N.E. 37 Street  
 Suite, Apt #, etc.  
 27 | Oakland Park, FL  
 City & State

23 | Zip 33334 | Country US  
 24 | 25 |

28 | Zip 33334 | Country US  
 29 | 30 |

9. Name and Address of Current Registered Agent

**JEAN-PIERRE, ELIE**  
 2517 SW 6 CT  
 FT LAUDERDALE FL 33312

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a family unit, and accept the obligations of section 617.0503, Florida Statutes.

SIGNATURE

*Elie Jean-Pierre*  
 Signature of typed or printed name of registered agent and title if applicable

*Elie Jean-Pierre*  
 (NOTE: Registered Agent signature required when re-stating)

6-30-98  
 DATE

12. OFFICERS AND DIRECTORS

TITLE	P	[ ] DELETE
NAME	JEAN-PIERRE, ELIE	
STREET ADDRESS	2517 SW 6TH COURT	
CITY-STATE-ZIP	FT. LAUDERDALE FL	
TITLE	D	[ ] DELETE
NAME	JEAN-CLAUDE, CHARLES	
STREET ADDRESS	610 NWE 7TH COURT	
CITY-STATE-ZIP	POMPANO BEACH FL	
TITLE	V	[ ] DELETE
NAME	REIMBOLD, PHILISTIN	
STREET ADDRESS	318 S.W. 27TH COURT	
CITY-STATE-ZIP	FT. LAUDERDALE FL	
TITLE	D	[ ] DELETE
NAME	JEAN-PIERRE, ELIPHATE	
STREET ADDRESS	130 N.E. 12TH ST.	
CITY-STATE-ZIP	POMPANO BEACH FL	
TITLE	T	[ ] DELETE
NAME	PIERRE, FRITO	
STREET ADDRESS	3541 NW 33RD AVE.	
CITY-STATE-ZIP	FT. LAUDERDALE FL	
TITLE	D	[ ] DELETE
NAME	PERICLES, DASSAS S	
STREET ADDRESS	701 N.W. 10 ST.	
CITY-STATE-ZIP	POMPANO BEACH FL 33060	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	[ ] Change [ ] Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	[ ] Change [ ] Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	[ ] Change [ ] Addition
3.2 NAME	V. LOUCIUS Charles
3.3 STREET ADDRESS	N.W Fort-Lauderdale, FL
3.4 CITY-STATE-ZIP	
4.1 TITLE	[ ] Change [ ] Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	[ ] Change [ ] Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	[ ] Change [ ] Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Elie Jean-Pierre*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Elie Jean-Pierre*

6-30-98 954-568-1651  
 Date Daytime Phone: F

CR2E037 (5/98)