1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 700337

1. Corporation Name

BEREAN BAPTIST CHURCH, INC.

Principal Place of Business

1016 N.E 37 STREET OAKLAND PARK FL 33334 Mailing Address

1016 N.E. 37 STREET OAKLAND PARK FL 33334

FILED Mar 04, 1999 8:00 am § Secretary of State

03-04-1999 90023 016 ****70.00



		÷	the state of the s	
•	Place of Business	375/00	3. Date Incorporated or Qualifed 01/18/1960	
	N.E. 37 Street 26 1016 N.E	, J/ SILEE	4. FEI Number Applied For	
Suite, Apt.	├ ───		16-0322713 Not Applica	
City & Stat	te / City & State		\$8.75 Additiona	
23 (Da K	land tack Fl. 28 Oakl la	rk, tL.	5. Certificate of Status Desired Fee Required	
Zip	Country Zip	Country	6. Election Campaign Financing S5.00 May Be	
3 33	334 ₂₅ ₂₉ 33334	30 USA	Trust Fund Contribution Added to Fees	
	9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
		81 Name		
JEAN-PIEI	rre. Elie	82 Street A	ddress (P.O. Box Number is Not Acceptable)	
2517 SW 6 CT				
FT LAUDERDALE FL 33312			83	
11 51051		84 City	85 Zip Code	
	\sim 1 //		· FL '	
11. Pursuant	to the provisions of Sections 6/7.0502/and 617.1508, Florida Statut	es, the above-named c	corporation submits this statement for the purpose of changing its register ration's board of directors. I hereby accept the appointment as registered	
office or	registered agent/or both, in the State of Plorida. Such change was a am familiar with and accept the obligations of, Section 617.0503, Flo	uthorized by the corpor	ration's board of directors. I hereby accept the appointment as registered	
-	XV has Francis Elica	lane Via	v/D/	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE	Registered Agent signature req	quired when reinstating) DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
TITLE	P DELETE	1.1 TITLE	☐ Change ☐ Ad	
NAME	JEAN-PIERRE ELIE	1.2 NAME		
STREET ADDRESS		1.3 STREET ADDRESS		
	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	•	
CITY-ST-ZIP	D DELETE	2.1 TITLE	. Change Ad	
NAME	JEAN-CLAUDE, CHARLES	2.2 NAME		
	A SAME THE COLUMN	2.3 STREET ADDRESS		
STREET ADDRESS		2.4 CITY-ST-ZIP	The state of the s	
CITY-ST-ZIP	POMPANO BEACH FL	3.1 TITLE.	☐ Change ☐ Ad	
TITLE		3.1 MAME		
NAME	LOUICIUS, CHARLES			
STREET ADDRESS		3.3 STREET ADDRESS	•	
City-ST-ZIP	FT. LAUDERDALE FL	3.4. CITY-ST-ZIP	☐ Change ☐ Ad	
TITLE		4.1 TITLE	Hamile Ha	
NAME	JEAN-PIERRE, ELIPHAITE	4.2 NAME	•	
STREET ADDRESS	100 /112/ (21/) 0 //	4.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL	4.4 CITY-ST-ZIP	☐ Change ☐ Ad	
TITLE	T DELETE	5.1 TITLE	ChangeAd	
NAME	PIERRE, FRITO	5.2 NAME		
STREET ADDRESS	3541 NW 33RD AVE.	5.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	5.4 CITY-ST-ZIP		
TITLE	D DELETE	6.1 TITLE	☐ Change ☐ Ad	
NAME	PERICLES, DASSAS S	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS	1	
	PONDANO DESCRIPTI ACCORD	64 CITY-ST-7IP	\sim // \sim	

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 signafure 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 6177 Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR