## 2003 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT#754899**

FILED Sep 01, 2003 Secretary of State

Entity Name: HAITIAN EVANGELICAL BAPTIST CHURCH, INC.

Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:		
800 NW 14 MIAMI, FL	1TH STREET 33136 US	_				
Current Mailing Address:			New Maili	New Mailing Address:		
PO BOX 69 MIAMI, FL						
FEI Number:	94-3086686	FEI Number Applied For()	FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
THONY, F 16801 NE N MIAMI, F	14 AVE 105					
	named entity of Florida.	submits this statement for the p	urpose of changing it	ts registered office or registered agent, or both,		
SIGNATUF						
	Electro	onic Signature of Registered Age	ent	Date		
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P ( MOISE, JEAN 10804 NW 2N MIAMI, FL 33	ID AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	V ( HYPPOLITE, 7624 DILDO I MITAMAR, FL	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T ( JEAN, LUC 551 NW 183F MIAMI, FL 33		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	EUGENE, FR 16801 NE 14		Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition EUGENE, FRANTZ D 7818 FAIRWAY BVLD MIRAMAR, FL 33023		
Title: Name: Address: City-St-Zip:	M ( CALIXTA, HAI 6729 CAMELI MIRAMAR, FL	A DRIVE	Title: Name: Address: City-St-Zip:	M (X) Change ( ) Addition CALIXTE, HAROLD 6729 CAMELIA DRIVE MIRAMAR, FL 33025		
Title: Name: Address: City-St-Zip:	D ( DARIUS, CAR 8801 N CRES MIRAMAR, FL	CENT DR	Title: Name: Address: City-St-Zip:	()Change()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JONATHAN HYPPOLITE AD S 09/01/2003