_	
g	
8	

DOCU		0072	278	ORT (U	BR)	7 Sec	FILE 02, 2002 cretary (01-2002 90311 (8:00 of Sta	te	***************************************
THE HA	ITIAN COMMUNITY SERVICE	E CENTE	ER, INC.		V					
Principal Pla	ce of Business	Mailir	ng Address	-						
.1108 NW 1ST FT. LAUDERD			NW 1ST AVE. NUDERDALE FL 3330	e						
				,						
2. Principal	Place of Business	3. Ma	iling Address			.	INST (KRITE BRITE) BRITE BR	ini ebili tebih ileli t	CERT (B) (170)	
Suite, Apt	#, etc.	Su	uite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & Sta	ite	Ci	ty & State			4. FEI Number		 	polied For	7
Zip	Country	Zi	p	Country		5. Certificate of St	tatus Desired	\$8.75 Ac		4
	6. Name and Address of Curren	t Begister	ed Ament	<u> </u>			ireas of New Registe	Fee Requir	ed	4
	V. Halle dire Address vi Cultur	·		- Nan	ne					7
1108 NW	AN, DIEUSEUL 1ST AVE.	ے پر محبوث ہا۔	<u>-</u>	Stre	et Addres	ss (P.O. Box Number is	Not Acceptable) -			-
FI. LAUU	ERDALE FL 33302			City		-		FL Zip Coo	de	1
8. The above	e named entity submits this statement	for the purp	ose of changing its	registered office	e or regis	stered agent, or both, in	the state of Florida.			1
	,			•						
SIGNATURE			<u> </u>							1
<u>.</u>	Signature, typed or printed name of registered age	n and title if app	plicable. (NOT	E. Registered Agent s	ignature recu	uired when reinstating)	,	TE		4
```.	FILE NOW: FEE IS \$61.25		9. Election Car Trust Fund (		ng 🗆	\$5.00 May Be Added to Fees		eck Payable ment of Stat		
10.	OFFICERS AND O	IRECTORS		11.		ADDITIONS/CHANG	ES TO OFFICERS AND			1_
TITLE NAME STREET ADDRESS	D SAINT JEAN, DIEUSEUL 1108 NW 1ST AVE. FT. LAUDERDALE FL 33302		☐ Celete	TITLE NAME STREET ADDRI CITY-ST-ZIP	ss			Change	Addition	CR2E037 (9/01
CITY-ST-ZIP TITLE	D D		☐ Delete	TITLE				☐ Change	Addition	닉器
NAME	SAINT JEAN, GINETTE 1108 NW 1ST AVE.			NAME STREET ADDR						
STREET ADDRESS CITY+ST-ZIP	FT. LAUDERDALE FL 33302			CITY-ST-ZIP	~					
TITLE	D Charles, Wilna		☐ Delete	TITLE				☐ Change	Addition	
NAME STREET ADDRESS	1108 NW 1ST AVE.			NAME STREET ADDRE	ss	<del>-</del>				
.CITY-ST-ZIP	FT. LAUDERDALE FL 33302			CITY-ST-ZIP						-
TYTLE NAME			Delete	TITLE NAME			••	☐ Change	Addition	
STREET ADDRESS				STREET ADDRE	ss					
CITY-ST-ZIP			☐ Oeleta	CITY-ST-ZIP	-		- <u>-</u>	Change	Addition	7
NAME			- 7600	NAME	_					
STREET ADDRESS CITY-ST-ZIP				STREET ADDRE	55					
TITLE			☐ Delete	TITLE				☐ Change	Addition	1
NAME	1			NAME	1					ı

STREET ADDRESS

23/2002

CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 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 10 or Block 11 if chapter 617, Florida Statutes.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

Attachment Document # NO1000007278

response to the state of the background on the front of this check, and the mage Sale® logo on back. If not present, do not cash, in the state of the background on the front of this check, and the mage Sale® logo on back. If not present, do not cash, in the state of the background on the front of this check, and the mage Sale® logo on back. If not present, do not cash, in the state of the background on the front of this check, and the mage Sale® logo on back. If not present, do not cash, in the state of the background on the front of this check, and the mage Sale® logo on back. If not present, do not cash, in the state of the background on the front of this check, and the mage Sale® logo on back. If not present, do not cash, in the state of the background on the front of this check, and the mage Sale® logo on back. If not present, do not cash, in the state of the background on the background o	Programmer .
130	4
FIRST FORT LAUDERDALE HAITIAN 04-00	, <b>-</b>
954-390-7668 P.O. BOX 209	
63- 63- 63- 63- 63- 63- 63- 63- 63- 63-	27/631 FL 976 .
PAY	
TO THE ORDER OF SECRETARY OF SIGNED	
The second of th	
DOLLARS A	Security features are rectaded. Details on each
Bank of America.	, ,
A Dalla VI Allie I Ca.	
ACH RVT 083100277	
4 N/2 1000 207778 N. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
FOR A 10 1000 00 1210 Quesen Juin Kung	<i>M</i> P {
"001324" ::0631002??:: 0036650333396"	
	5

Attachment Doument # NO1000007278 96228

DR 14 8 84/90 STATE OF FLORIDA
DEPARTMENT OF REVENUE
CONSUMER'S CERTIFICATE OF EXEMPTION
Issued Pursuant to Sales and Use Tax Law
Chapter 212, Florida Statutes
This Certificate is Non-Transferable

78479

15SUE DATE 10/13/92 EXPIRATION DATE

10/13/97

CERTIFICATE NUMBER

16-03-250519-55C

TYPE OF ORGANIZATION

REL EGENUS

This is to certify that the organization indicated below is hereby exempt from the payment of Sales or Use Tax on the purchase or lease of tangible personal property, the lease of transient rental accommodations or real property.

Mailing Address:

Location Address:

1ST FORT LAUDERALE HAITIAN MISSIONARY BAPTIST CHURCH. INC.

P. O. 80X 209

FT LAUDERDALE

FL 33302-0000

591 N.W. 31ST AVENUE FT LAUDERDALE FL 33311-000

J. Thomas Heindon

EXECUTIVE DIRECTOR

J. THOMAS HERNDON

SEE REVERSE SIDE FOR IMPORTANT INFORMATION.

•

. .