2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009622

FILED Apr 01, 2008 Secretary of State

Entity Name: EGLISE EVANGELIQUE BAPTISTE DE LA GRACE CORP.

Current Principal Place of Business: New Principal Place of Business:

2362 NW 95 STREET MIAMI, FL 33147

Current Mailing Address: New Mailing Address:

2362 NW 95 STREET MIAMI, FL 33147

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EDOUARD, GEORCINVIL EDOUARD, GEORCINVIL REV. 725 N.E. 179 TERRACE

725 N.E. 179 TERRACE

NORTH MIAMI BEACH, FL 33162 US NORTH MIAMI BEACH, FL 33162 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: REV. GEORCINVIL EDOUARD 04/01/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete EDOUARD, GEORCINVIL JEAN-JACQUES, LEVOISIER Name: Name: 2362 NW 95 STREET Address: 2362 NW 95 STREET Address: City-St-Zip: MIAMI, FL 33147 City-St-Zip: MIAMI, FL 33147

Title: () Delete Title: (X) Change () Addition JEAN-JACQUES, LEVOISIE Name: Name: EDOUARD, GEORCINVIL REV. Address: 2362 NW 95 STREET Address: 2362 NW 95 STREET City-St-Zip: MIAMI, FL 33147 City-St-Zip: MIAMI, FL 33147

Title: () Delete Title: () Change () Addition

DELUCE, FRANTZ Name: Name: 2362 NW 95 STREET Address: Address: City-St-Zip: MIAMI, FL 33147 City-St-Zip:

Title: () Delete Title: T/D (X) Change () Addition Name: PIERRE, EDER Name: PIERRE, EDER

Address: 2362 NW 95 STREET Address: 2362 NW 95 STREET City-St-Zip: MIAMI, FL 33147 City-St-Zip: MIAMI, FL 33147

Title: () Delete Title: () Change (X) Addition

SAINT-PHARD, DIEUVET Name: Name: 2362 NW 95 STREET Address: Address: MIAMI, FL 33147 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: REV. GEORCINVIL EDOUARD C/D 04/01/2008