


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 23, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # N94000003066**  
 1. Entity Name  
 NORTH HIALEAH BAPTIST CHURCH, INC.



Principal Place of Business  
 5800 PALM AVE  
 HIALEAH, FL 33012

Mailing Address  
 5800 PALM AVE  
 HIALEAH, FL 33012

**DO NOT WRITE IN THIS SPACE**



03122007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-0774197	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

RAMOS, DANIEL  
 5855 W. 2ND AVE.  
 HIALEAH, FL 33012

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Daniel Ramos* DANIEL RAMOS 3/20/2007  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EIKENBERRY, JAMES 3180 W. 10TH AVE. HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMOS, DANIEL 5855 W. 2ND AVE. HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEEKS, LARRY 740 SW 61 AVE PLANTATION, FL 33317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVENPORT, KEN 1219 N.W. 161 AVE. PEMBROKE PINES, FL 33028
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSELLO, RENE G 12100 SW 271ST ST. HOMESTEAD, FL 33032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000675989  
 03/30/07-80083-019 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Daniel Ramos* DANIEL RAMOS 3/20/2007 305-821-4021  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #