

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000553

FILED
Apr 14, 2005
Secretary of State

Entity Name: SHALOM BAPTIST CHURCH INC.

Current Principal Place of Business:

13800 N E 11TH AVENUE
MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

13800 N E 11TH AVENUE
MIAMI, FL 33161

New Mailing Address:

FEI Number: 03-0404514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONCOEUR, JERRY
13800 N E 11TH AVENUE
MIAMI, FL 33161 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONCOEUR, JERRY
Address: 13800 N E 11TH AVENUE
City-St-Zip: MIAMI, FL 33161

Title: VD () Delete
Name: MONCOEUR, GHINELLE
Address: 13800 N E 11TH AVENUE
City-St-Zip: MIAMI, FL 33161

Title: TD () Delete
Name: LAGUERRE, MICHEL JR
Address: 301 NE 172ND STREET
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: SD (X) Delete
Name: LYDECANA, RAYNOLD
Address: 1120 N E 81ST STREET
City-St-Zip: BAY SHORE, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: LAGUERRE, MICHEL
Address: 301 NE 172ND STREET
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JERRY MONCOEUR

PD

04/14/2005

Electronic Signature of Signing Officer or Director

Date