2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003173

FILED Apr 26, 2006 Secretary of State

Entity Name: EGLISE SENTINELLE DE LA DERNIERE HEURE DU 7E JOUR INCORPORATED

Current Principal Place of Business:			New Pr	New Principal Place of Business:		
	5TH STREET JDERDALE, F					
Current M	lailing Addre	ss:	New Ma	New Mailing Address:		
PO BOX 8 CORAL SF	107 PRINGS, FL 3	33075 US				
FEI Number:	: 65-0607348	FEI Number Applied For()	FEI Number Not A	Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name a	and Address o	of New Registered Agent:	
BLDG 109 TAMARAC	61TH AVENUI UNIT # 109 C, FL 33319 U	JS	5841 N\ BLDG 1 TAMAR	LAMY, YVES A REV 5841 NW 61TH AVENUE BLDG 19 UNIT # 109 TAMARAC, FL 33319 US e of changing its registered office or registered agent, or both,		
	e of Florida.		o parposs or criarigi.	ig no regionale	a cinoc or regionated agent, or bean,	
SIGNATUF				04/26/2006		
	Electro	nic Signature of Registered A	Agent		Date	
OFFICERS	S AND DIREC	CTORS:	ADDITI	ONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LAMY, YVES	H AVENUE BLDG 19 UNIT 109	Title: Name: Address: City-St-Zi	p:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SYLVESTE, FI 3970 NW 31T) Delete RANCK DEACON H AVENUE # 1 RDALE, FL 33318	Title: Name: Address: City-St-Zi	3940 NW 3	(X) Change () Addition , FRANCK DEACON :0 TERRACE # 1 DERDALE, FL 33311	
Title: Name: Address: City-St-Zip:	JN-GERARD, 1301NW 3RD		Title: Name: Address: City-St-Zi	p:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LECIPA, ALEX 308 IOWA) Delete KIS RDALE, FL 33311	Title: Name: Address: City-St-Zi	p:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SAINT LOUIS, 6820 BROADN		Title: Name: Address: City-St-Zi	p:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LAMY, MARIE	TAVENUE BLDG 19 UNIT109	Title: Name: Address: City-St-Zi	2020NW 12	(X) Change () Addition SALIE L DEACON 2TH AVENUE DERDALE, FL 33311 US	

I hereby certify that the information supplied with this filing does not qualify for the 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: YVES ANDRE LAMY REV 04/26/2006