DOCUMENT # N04000010908

1. Entity Name
INTERNATIONAL ZION CHURCH OF GOD PENTECOSTAL, INC.

Principal Place of Business
1610 W 16TH STREET
RIVIERA BEACH FL 33404

Mailing Address
1610 W 16TH STREET
RIVIERA BEACH FL 33404

FILED
Jul 13, 2006 08:00 AM
Secretary of State

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07102006 No Chg-NP CR2E037 (4/06)

4. FEI Number
20-1910758

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SAINT-CYR, IRICK F
5351 JEFFERY AVE
WEST PALM BEACH, FL 33407

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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 _____

Filing Fee is $61.25
Due by September 6, 2006

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

U00000569939
07/13/06-80009-017 61.25

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SAINT-CYR, IRICK F
STREET ADDRESS	5351 JEFFERY AVE
CITY-ST-ZIP	WEST PALM BEACH, FL 33407
TITLE	VD
NAME	LOUIS-CHARLES, JEAN L
STREET ADDRESS	814 CYPRESS DR APT 6
CITY-ST-ZIP	LAKE PARK, FL 33403
TITLE	SD
NAME	SAINT-CYR, BENJAMIN
STREET ADDRESS	1700 WINDORAH WAY APT E
CITY-ST-ZIP	WEST PALM BEACH, FL 33411
TITLE	DT
NAME	REJUS, EDYY
STREET ADDRESS	5880 BAHAMA CT
CITY-ST-ZIP	LAKE PARK, FL 33403
TITLE	D
NAME	DERILUS, JEAN
STREET ADDRESS	329 EAST ILEX DR
CITY-ST-ZIP	LAKE PARK, FL 33403
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: IFSaintCyr 7-10-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #