

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Entity Name: EGLISE EVANGELIQUE BAPTISTE DE LA GRACE CORP.**Current Principal Place of Business:**2362 NW 95 STREET
MIAMI , FL 33147**Current Mailing Address:**725 NE 179TH TERRACE
NORTH MIAMI BEACH, FL 33162 US**FEI Number: 38-3711504****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**EDOUARD, GEORCINVIL REV.
725 N.E. 179 TERRACE
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CEO/PRESIDENT BOARD OF DIRECTORS
Name	EDOUARD, GEORCINVIL REV.
Address	725 NE 179TH TERRACE
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	SECRETARY, BOARD MEMBER AT LARGE
Name	DELUCHE, FRANTZ DEACON
Address	725 NE 179TH TERRACE
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	TREASURY, BOARD MEMBER AT LARGE
Name	PIERRE, EDER DEACON
Address	725 NE 179TH TERRACE
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	ASST. TREASURER, BOARD MEMBER AT LARGE
Name	SAINT-PHARD, DIEUVET DEACON
Address	725 NE 179TH TERRACE
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	VICE PRESIDENT BOARD OF DIRECTOR AT LARGE
Name	ASCENCIO, MAX DEACON
Address	725 NE 179TH TERRACE
City-State-Zip:	NORTH MIAMI BEACH FL 33162

I hereby 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 all other like empowered.

SIGNATURE: EDOUARD , GEORCINVIL , REV.**CEO/PRESIDENT****02/19/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date