

**2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N99000001341

**Entity Name:** EL BETHEL MISSIONARY CORP.**Current Principal Place of Business:**1615 NW 38TH AVE  
FT LAUDERDALE, FL 33311**Current Mailing Address:**4230 NE 3TH TERR  
POMPANO BEACH, FL 33064 US**FEI Number:** 65-0909506**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAMBERT, CLEOMIE  
2715 NW 47TH LN  
LAUDERDALE LAKES, FL 33313 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:** CLEOMIE LAMBERT

11/07/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P/D
Name	LAMBERT, CLEOMIE PASTOR
Address	2715 NW 47TH LN.
City-State-Zip:	LAUDERDALE LAKES FL 33313

Title	AT
Name	DELICEY, SHERLIE
Address	3467 NW 37 ST
City-State-Zip:	LAUD LAKES FL 33309

Title	VP
Name	JEUNE, IRECK
Address	4287 REFLECTIONS BLD 202
City-State-Zip:	SUNRISE FL 33351

Title	TREASURER
Name	JULES, MAGDELEINE
Address	7380 PLANTATION RD
City-State-Zip:	PLANTATION FL 33317

Title	EXECUTIVE SECRETARY
Name	JEAN , IVELENE METELLUS
Address	5370 SW 8TH COURT
City-State-Zip:	MARGATE FL 33068

Title	ADVISOR
Name	WILSON, PINCHITA
Address	1615 NW 38TH AVE
City-State-Zip:	FT LAUDERDALE FL 33311

*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:** CLEOMIE LAMBERT**OWNER**

11/07/2021

Electronic Signature of Signing Officer/Director Detail

Date