

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740071

FILED
Mar 20, 2007
Secretary of State

Entity Name: BETHANY BAPTIST CHURCH OF MIAMI, INC.

Current Principal Place of Business:

777 N.W. 54TH ST.
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

777 N.W. 54TH ST.
MIAMI, FL 33127

New Mailing Address:

FEI Number: 59-1914581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VOLCE, PIERRE
1822 NW 34ST
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

PIERRE, VOLCE
1822 NW 34ST
MIAMI, FL 33142 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: VOLCE PIERRE

03/20/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AUGUSTE, SALIM PASTOR
Address: 1970 NE 159TH STREET
City-St-Zip: MIAMI, FL 33162

Title: D () Delete
Name: NOELLISTE, YVAN
Address: 1200 NE 16 AVE D-402
City-St-Zip: MIAMI, FL 33161

Title: SD () Delete
Name: LOUISSAINT, ELIDE
Address: 1880 NW 36 STREET
City-St-Zip: MIAMI, FL 33142 US

Title: ASD () Delete
Name: VALBRUN, JOSEPH
Address: 12404 NE 1ST AVENUE
City-St-Zip: N. MIAMI, FL 33161 US

Title: TD () Delete
Name: REMY, ANDRE
Address: 120 NE 170 STREET
City-St-Zip: MIAMI, FL 33162

Title: ATD () Delete
Name: OTHELOT, ESTIME
Address: 15321 NE 10TH AVE
City-St-Zip: MIAMI, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: NOELLISTE, YVAN
Address: 12000 NE 16 AVE D-402
City-St-Zip: MIAMI, FL 33161

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

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

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

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 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: SALIM AUGUSTE

PD

03/20/2007

Electronic Signature of Signing Officer or Director

Date