

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755401

FILED
Apr 17, 2007
Secretary of State

Entity Name: L'EGLISE DE LA PERFECTION EN JESUS-CHRIST, INC.

Current Principal Place of Business:

585 N.W. 71ST ST.
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

585 N.W. 71ST ST.
MIAMI, FL 33150

New Mailing Address:

FEI Number: 59-2492862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAMIL, JEAN ST. VIL
585 N.W. 71 ST.
MIAMI, FL 33150 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: CLERGE, WILLIAM E,
Address: 585 NW 71ST STREET
City-St-Zip: MIAMI, FL 00000,

Title: STD () Delete
Name: JEAN, JOEL
Address: 585 NW 71ST STREET
City-St-Zip: MIAMI, FL 33150

Title: VD () Delete
Name: FAMIL, JEAN ST VIL,
Address: 585 NW 71ST STREET
City-St-Zip: MIAMI, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: FAMIL JEAN STVIL

VD

04/17/2007

Electronic Signature of Signing Officer or Director

Date