

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 30, 2007 8:00 am**  
**Secretary of State**

01-30-2007 90014 019 \*\*\*\*75.00



**DOCUMENT # 759537**  
 1. Entity Name  
**CHURCH OF GOD, SOURCE OF VICTORY, AND HOUSE OF PRAYER, INC.**

Principal Place of Business      Mailing Address  
**45 N.E. 54TH STREET**      **45 N.E. 54TH STREET**  
**MIAMI FL 33137**      **MIAMI FL 33137**



2. Principal Place of Business - No P.O. Box #      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

1st MOORE      CR2E037 (10/06)

City & State      City & State

4. FEI Number      Applied For  
**90-0083902**      Not Applicable

Zip      Country      Zip      Country

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

6. Name and Address of Current Registered Agent  
**RE'JOUIS, WILNER REV**  
**10659 NE 11TH AVE.**  
**MIAMI SHORES FL 33138**  
*2100 Sans Souci BLVD*  
*Apt 601*  
*North Miami Fl*  
*33181*

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable      (NOT) Registered Agent signature required when re-registering      DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

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

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE: PD NAME: RE'JOUIS, WILNER REV PASTOR STREET ADDRESS: 2100 SANS SOUCI BLVD CITY-STATE-ZIP: MIAMI SHORES FL 33138	<input type="checkbox"/> Delete
TITLE: V NAME: RE'JOUIS, MARIE C F STREET ADDRESS: 2100 SANS SOUCI BLVD CITY-STATE-ZIP: MIAMI SHORES FL 33138	<input type="checkbox"/> Delete
TITLE: TD NAME: ST GEORGES, NELSON B SR STREET ADDRESS: 150 NE 70th St CITY-STATE-ZIP: MIAMI FL 33138	<input type="checkbox"/> Delete
TITLE: ATD NAME: ST GEORGES, BERNADETTE STREET ADDRESS: 150 NE 70TH ST CITY-STATE-ZIP: MIAMI FL 33138	<input type="checkbox"/> Delete
TITLE: S NAME: GARSON, WILSON STREET ADDRESS: 13740 NW 3RD CITY-STATE-ZIP: MIAMI FL 33138	<input type="checkbox"/> Delete
TITLE: T NAME: POMPEI, MARIE STREET ADDRESS: 1000 NW 135 ST CITY-STATE-ZIP: MIAMI FL 33138	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: Abner Francis STREET ADDRESS: 7815 NW 2nd Ave CITY-STATE-ZIP: Miami FL 33138	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: Rodrigue St. Sirein STREET ADDRESS: 81 NW 49 St CITY-STATE-ZIP: Miami Fl 33137	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: Flavie Ouellet Noel STREET ADDRESS: 8257 NE 82 CT CITY-STATE-ZIP: Miami FL 33138	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Wilner Rejouis*      *Wilner Rejouis*      *01-23-07*      *286-262-0846*