

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 MIAMI FL 33137 **45 N.E. 54TH STREET 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
 Zip Country Zip Country

4. FEI Number **90-0083902** Applied For Not Applicable
 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-ST-ZIP: MIAMI SHORES FL 33138	<input type="checkbox"/> Delete
TITLE: V NAME: RE'JOUIS, MARIE C F STREET ADDRESS: 2100 SANS SOUCI BLVD CITY-ST-ZIP: MIAMI SHORES FL 33138	<input type="checkbox"/> Delete
TITLE: TD NAME: ST GEORGES, NELSON B SR STREET ADDRESS: 150 NE 70th St CITY-ST-ZIP: MIAMI FL 33138	<input type="checkbox"/> Delete
TITLE: ATD NAME: ST GEORGES, BERNADETTE STREET ADDRESS: 150 NE 70TH ST CITY-ST-ZIP: MIAMI FL 33138	<input type="checkbox"/> Delete
TITLE: S NAME: GARSON, WILSON STREET ADDRESS: 13740 NW 3RD CITY-ST-ZIP: MIAMI FL 33138	<input type="checkbox"/> Delete
TITLE: T NAME: POMPEI, MARIE STREET ADDRESS: 1000 NW 135 ST CITY-ST-ZIP: MIAMI FL 33138	<input type="checkbox"/> Delete

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