

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2003 8:00 am
Secretary of State

02-06-2003 90060 009 ****75.00

DOCUMENT # 759537

1. Entity Name

**CHURCH OF GOD, SOURCE OF VICTORY, AND HOUSE OF P
RAYER, INC.**



Principal Place of Business

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

Mailing Address

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **22-2321231**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RE'JOUIS, WILNER REV
10659 NE 11TH AVE.
MIAMI SHORES FL 33138**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**PD
RE'JOUIS, WILNER REV PASTOR
10659 NE 11TH AVE.
MIAMI SHORES FL 33138**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**Youth director T
Wilson Garson
13710 NW 3rd Court
Miami FL 33168**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DVAP Life President
RE'JOUIS, MARIE C F
10659 NE 11TH AVE.
MIAMI SHORES FL 33138**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**Ass. Treasurer T
Sr Marie Pompe
52 NW 111 ST N. Miami Ave
Miami FL 33168**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**TD
ST GEORGES, NELSON B SR
150 NE 70TH ST.
MIAMI FL 33138**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**ATD
ST GEORGES, BERNADETTE
150 NE 70TH ST
MIAMI FL 33138**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**SD
MIL'HOMME, LAURIUS
13424 ASWAN ROAD, APT 115
OPALOCKA FL 33054**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**T
GEORGES, WILLY J
9170 NE 8 AVE
MIAMI FL 33138**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED

Rejois

02-05-03

CR2E037 (10/02)