## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000000701

Entity Name: HARMONY OF THE DIVINE LIGHT CO.

FILED Jul 02, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1629 S 21ST AVE HOLLYWOOD, FL 33020 **Current Mailing Address: New Mailing Address:** 1629 S 21ST AVE HOLLYWOOD, FL 33020 FEI Number: 65-0891232 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CASTOR, YANICK F REV. 10352 SW 9TH LANE PEMBROKE PINES, FL 33025 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete CASTER, YANCIKD F REV CASTOR, YANICK F REV Name: Name: 10352 SW 9TH LANE Address: 10352 SW 9TH LANE Address: City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: PEMBROKE PINES, FL 33025 Title: () Delete Title: () Change () Addition FONTIANE, RAYMOND Name: Name: Address: 946 SW 102 TERRACE Address: City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition FAOTAINE, KARLYN Name: FANTAINE, KARLYN Name: 946 SW 102 TERRACE Address: Address: 946 SW 102 TERRACE City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: PEMBROKE PINES, FL 33025 Title: () Delete Title: () Change () Addition FONTAINE, LUCE Name: Name: Address: 10352 SW 9TH LANE Address: City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition AUFUSTE, ANDRIE AUGUSTE, ANDREE Name: Name: 2904 CRESCENT PLACE 2904 CRESCENT PLACE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

MIRAMAR, FL 33025

SIGNATURE: YANICK F. CASTOR **PRES** 07/02/2004

MIRAMAR, FL 33025

City-St-Zip: