

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003538

FILED  
Apr 30, 2007  
Secretary of State

**Entity Name:** EGLISE DE DIEU DE LA PROPHETIE DE MIAMI, TABERNACLE DE SAINTETE,INC.

**Current Principal Place of Business:**

195 N E 127TH STREET  
NORTH-MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

195 N E 127TH STREET  
NORTH-MIAMI, FL 33161

**New Mailing Address:**

FEI Number: 65-1012880

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAFLEUR, DUMAS KERNIZAN  
195 N E 127TH STREET  
NORTH-MIAMI, FL 33161 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: PD ( ) Delete  
Name: LAFLEUR, DUMAS KERNIZAN  
Address: 195 N E 127TH STREET  
City-St-Zip: NORTH-MIAMI, FL 33161

Title: VD ( ) Delete  
Name: MIMY, CAROLLE  
Address: 1551 NE 167TH STREET # 201S  
City-St-Zip: NORTH-MIAMI BEACH, FL 33162

Title: STD ( ) Delete  
Name: LAFLEUR, BERNADETTE  
Address: 195 N E 127TH STREET  
City-St-Zip: NORTH-MIAMI, FL 33161

**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 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: DUMAS K. LAFLEUR

PD

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date