2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 03, 2005 8:00 am Secretary of State DOCUMENT # N00000004133 1. Entity Name 05-03-2005 90098 001 ****75.00 HOLINESS CHURCH OF ZION FOR ALL NATIONS, INC. Principal Place of Business Mailing Address 1128 NW 113 TERRACE 11400 NW 12 AVENUE **MIAMI FL 33168 MIAMI FL 33168** 2. Principal Place of Business 3. Mailing Address 128 NW 113 TEK Suite, Apt. #, etc. 114 00 NW 12 AUE Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State Applied For 4. FEI Number 65-0706850 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent AUGUSTE, OFFRAND D REV. Street Address (P.O. Box Number is Not Acceptable) 1128 NW 113 TERR. **MIAMI FL 33168** 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) FILE NOW: FEE IS \$61.25 **\$5.00** May Be Make Check Payable to 9. Election Campaign Financing Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11 MARIES. AUGUSTE T. ☐ Change Addition TITLE ☐ Delete TITLE T. AUGUSTE, OFFRAND D REV. NAME NAME 1128 NW 113 TERR 11400 NW 12TH AVENUE STREET ADDRESS STREET ADDRESS MIAMI, EL 33/68 MIAMI FL 33168 CITY-ST-ZIP CITY-ST-ZIP C. ORFELY D. AUGUSTE TITLE RE Delete ☐ Addition DERUS, REV. MARIE T ---NAME 11400 NW 113TER 11400 NW 12TH AVENUE STREET ADDRESS STREET ADDRESS MIAMI, FL 33168 MIAMI FL 33168 CITY-ST-7IP CITY-ST-ZIP Addition Delete TITLE ☐ Change AUGUSTE, ORFELY NEW. NAME NAME 11400 NW 12TH AVENUE STREET ADDRESS STREET ADDRESS MIAMI FL 33168 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete BILDAD, AUGUSTE D NAME NAME 1128 NW 113 TERR STREET ADDRESS STREET ADDRESS MIAMI FL 33168 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change Delete TITLE LAMY, KATHIA NAME NAME 8121 NW 4 AVE. STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-7IP Delete ☐ Change ☐ Addition TITLE TITLE FRANCE, YANICK NAME NAME 1050 NW 116 ST STREET ADDRESS STREET ADDRESS MIAMI FL 33168 CITY-ST-ZIP CITY-ST-ZIP

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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. ME OFFRAND AUGUSTE 42705 305-754287