

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2007 8:00 am
Secretary of State

02-27-2007 90005 035 ****61.25

DOCUMENT # N00000007534

1. Entity Name

MAHALALEEL EVANGELICAL CHURCH, INC.



Principal Place of Business

6151 MIRAMAR PARKWAY
SUITE 101
MIRAMAR FL 33023
US

Mailing Address

6151 MIRAMAR PARKWAY
SUITE 101
MIRAMAR FL 33023
US

2. Principal Place of Business - No P.O. Box #

6151 Miramar Pkw.

Suite, Apt. #, etc.

#101

City & State

Miramar, Florida

Zip
33023

Country

USA

3. Mailing Address

6151 Miramar Pkw.

Suite, Apt. #, etc.

#101

City & State

Miramar, Florida

Zip
33023

Country

USA

1st MOORE

CR2E037 (10/06)

4. FEI Number

65-1061876

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOGBO, CHUCK
2800 W. OAKLAND PARK BOULEVARD
SUITE #209
OAKLAND PARK FL 33311

7. Name and Address of New Registered Agent

Name

N/A

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

Francois Cerphy

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when re-registering)

2/15/07

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	<input type="checkbox"/> Delete
NAME	CERPHY, FRANCOIS	
STREET ADDRESS	700 N W 214TH STREET, #305	
CITY ST ZIP	MIAMI FL 33169	

TITLE	VD	<input type="checkbox"/> Delete
NAME	SMITH, MARIE	
STREET ADDRESS	6745 ROSE DRIVE	
CITY ST ZIP	MIRAMAR FL 33023	

TITLE	SD	<input type="checkbox"/> Delete
NAME	CERPHY, NICOLE	
STREET ADDRESS	700 N W 214TH STREET, #305	
CITY ST ZIP	MIAMI FL 33169	

TITLE	M	<input type="checkbox"/> Delete
NAME	JEAN MARC, DOMINIQUE	
STREET ADDRESS	5043 SW 168TH AVE	
CITY ST ZIP	MIRAMAR FL 33027	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY ST ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY ST ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		

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: *Francois Cerphy*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/07

Date

(954) 986-1755

Director's Phone #