

2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Jun 25, 2004 8:00 am
Secretary of State

06-25-2004 90001 018 ****61.25

DOCUMENT # N00000008546

1. Entity Name
EGLISE EVANGELIQUE BAPTISTE BETHESDA, INC.



Principal Place of Business
**718 NW 71 STREET
MIAMI, FL 33150 US**

Mailing Address
**1320 NE 136TH ST.
MIAMI, FL 33161**

34058783



2. Principal Place of Business

**5658 NW 7th
Suite, Apt. #, etc.
MIAMI FL 33127**

3. Mailing Address

**1320 NE 136 Street
Suite, Apt. #, etc.**

06182004 Chg-NP CR2E037 (10/03)

City & State
MIAMI

City & State
MIAMI

4. FEI Number
65-1073244

Applied For
Not Applicable

Zip
33127

Country
Florida

Zip
33161

Country
Florida

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LEBRUN, BANABAS
1320 NE 136TH ST.
MIAMI, FL 33161**

7. Name and Address of New Registered Agent

Name
Eglise Evangelique Baptiste Bethesda INC
Street Address (P.O. Box Number is Not Acceptable)
5658 NW 7th
City
MIAMI FL Zip Code
33127

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 **Rv. Banabas Lebrun**

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

(NOTE: Registered Agent signature required when reinstating)

DATE **6/21-04**

Filing Fee is \$61.25
Due by September 8, 2004

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	LEBRUN, BANABUS	1320 NE 136TH ST.	MIAMI, FL 33161	<input type="checkbox"/>
D	ANILUS, MERCIDIEU	555 N.E. 157TH TERRACE	MIAMI, FL 33162	<input type="checkbox"/>
D	ST. GEORGES, ERNEST	570 N.W. 119 STREET	MIAMI, FL 33168	<input type="checkbox"/>
D	LEBRUN, ROLANDE PAUL	1320 NE 136TH ST.	MIAMI, FL 33161	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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:

[Handwritten Signature]
SIGNATURE OR TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **6/21/04** Daytime Phone #