## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001886

FILED Apr 24, 2006 Secretary of State

Entity Name: EGLISE EVANGELIQUE BAPTISTE "VIE ABONDANTE" INC.

**Current Principal Place of Business: New Principal Place of Business:** 11636 NE 2ND AVE. 1511 S.E. PORTILLO RD. PORT SAINT LUCY, FL 34952 MIAMI, FL 33161 **Current Mailing Address: New Mailing Address:** PO BOX 531191 1511 S.E. PORTILLO RD. MIAMI, FL 331531191 PORT SAINT LUCY, FL 34952 FEI Number: 65-1112150 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: REJOUIS, ANAN L REJOUIS, ANAN L 11636 NE 2ND AVE. 13150 NW MIAMI CT. MIAMI, FL 33161 MIAMI, FL 33168 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: 04/24/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete REJOUIS, ANAN L Name: Name: Address: 13150 N.W. MIAMI CT. Address: City-St-Zip: MIAMI, FL 331684730 City-St-Zip: Title: ( ) Delete Title: () Change () Addition REJOUIS, EMILIE Name: Name: Address: 545 NW 126 STREET Address: City-St-Zip: MIAMI, FL 331684730 City-St-Zip: Title: () Delete Title: () Change () Addition SCHWARZ, MICHAEL Name: Name: 75 NE 128TH ST. Address: Address: City-St-Zip: MIAMI, FL 33161 City-St-Zip: Title: Title: () Change () Addition ( ) Delete Name: MACKENZY, S. Name: Address: 13150 N.W. MIAMI CT. Address: City-St-Zip: MIAMI, FL 331684730 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: S. MACKENZY SEC. 04/24/2006