2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2005 8:00 am
Secretary of State
02-01-2005 90028 041 ****70.00

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1. Entity Name
ASSOCIATION DES EGLISES ADVENTISTES HAITIENNES DE LA FLORIDE INCORPORATED

Principal Place of Business	Mailing Address
74 NE 75TH ST MIAMI, FL 33138	PO BOX 161696 ALTAMONTE SPRINGS, FL 32716-1696

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

01272005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3710292 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MONESTIME, JEAN-ALLAH
436 LOS ALTO WAY
101
ALTAMONTE SPRINGS, FL 32714

7. Name and Address of New Registered Agent

Name: MONESTIME, Jean-ALLAH
Street Address (P.O. Box Number is Not Acceptable): 1253 Welch Ridge Terrace
City: Apopka FL Zip Code: 32712

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: Jean-Allah Monestime — 1-27-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25 Due by May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BERTRESSE, MOISES 20650 NW 1ST CT. MIAMI, FL 33169	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Bertresse Moïse 2287 NW 77th Terrace Pembroke Pines, Fl. 33024 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BRISE, ROLAND 4707 LANGDALE DR. ORLANDO, FL 32808	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JEAN, PIERRE O 4201 NE 2 AVE MIAMI, FL 33137	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Jean, Pierre Ostane 7723 Covedale Dr. Orlando, Fl. 32818 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MYRTIL, NATANAEL 4201 NE 2 AVE MIAMI, FL 33137	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Myrtil Nathanaël 16262 Peach Way Delray Beach, Fl. 33484 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MONTESTIME, JEAN A 436 LOS ALTOS WAY #101 ALTAMONTE SPRINGS, FL 32714	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Monestime, Jean-Allah 1253 Welch Ridge Terrace Apopka, Fl. 32712 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST LAURENT, ABNER 10291 SW 9 LN PEMBROKE PINES, FL 33025	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Jean-Allah Monestime — 1-27-05 — (407) 496-8243
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #