

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000008353

FILED
Apr 30, 2009
Secretary of State

Entity Name: EGLISE EVANGELIQUE BAPTISTE MORIJA INC

Current Principal Place of Business:

4701 N. W 11 TH AVE
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

400 PENNSYLVANIA AVENUE
FORT LAUDERDALE, FL 33312

Current Mailing Address:

POST OFFICE BOX 9826
FT LAUDERDALE, FL 33312

New Mailing Address:

400 PENNSYLVANIA AVENUE
FORT LAUDERDALE, FL 33312

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRESUME, JOSEPH R
400 PENNSYLVANIA AVE
FT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

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: SONUEL LOUISSAINT

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRESUME, JOSEPH R
Address: 400 PENNSYLVANIA AVENUE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: D () Delete
Name: PETION, ARIOS
Address: 1120 SW 50 AVENUE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: GEFFRARD, LOUIS
Address: 2600 N.W. 9TH AVENUE
City-St-Zip: WILTON MANORS, FL 33311

Title: D () Delete
Name: TITUS, ALERT
Address: 3129 S.W. 13TH STREET, 3
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: CHARLES, VOLTAIRE
Address: 230 NW 43 CT
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: GIRARD, MARIE
Address: 400 PENNSYLVANIA AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SONUEL LOUISSAINT

RA

04/30/2009

Electronic Signature of Signing Officer or Director

Date