


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2004 8:00 am
Secretary of State

03-26-2004 90028 039 ***100.00

DOCUMENT # N02000000886 1. Entity Name HOLINESS EVANGELICAL CHURCH INC.			
Principal Place of Business 6319 NW 2ND AVE MIAMI, FL 33150		Mailing Address HLINESS EVAN CHURCH, INC 606A PLUKETT ST HOLLYWOOD, FL 33023	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Holiness Evan Church, Inc. 606A Plunkett Street	
City & State		City & State Hollywood, FL 33023	
Zip 33023	Country USA	4. FEI Number 04-3599734	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent PIERRE, MICHEL 606 A PLUNKETT ST HOLLYWOOD, FL 33023		7. Name and Address of New Registered Agent Name Michel Pierre Street Address (P.O. Box Number is Not Acceptable) 606A Plunkett Street City Hollywood FL 33023	
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 Michel Pierre Michel Pierre 3/23/2004 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees <small>Trust Fund Contribution.</small>	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSS GOUSSE, KELY 6034 DEWEY ST MIAMI, FL 33169 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY Ketty Pierre 606A Plunkett Street Hollywood, Florida 33023 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP PIERRE, FRANTZ 482 NW 165 ST RD., APT A #407 MIAMI, FL 33169 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Frantz Pierre 482 NW 165 Street, Rd Apt. #407 Miami, Florida 33169 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIERRE, KETTLY 6034 DEWEY STREET MIAMI, FL 33169 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Milliane Pierre 606A Plunkett Street Hollywood, Florida 33023 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Ketty Pierre Ketty Pierre 3/23/2004 305-962-7995 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			