2004 NOT-FOR-PROFIT CORFORATION ANNUAL REPORT

FILED Sep 21, 2004 8:00 am Secretary of State 08-30-2004 90014 020 ****80.00

1. Entity Nam	MENT # N02000002 APTIST CHURCH INC.	2597			3-30-2004 90014 0 ₂	:0 *****80.00	
Principal Place 1527 NW 11 HOUSE MIAMI, FL 3	9 ST 3167	Malling Address 1177 NW 105 TER HOUSE MIAMI, FL 33150					
2. Principal Place of Business 1507 1999 3. Mailing Address Suite, Apt. #, etc/ Suite, Apt. #, etc/ Suite, Apt. #, etc/			5 ter_	08122004 Chg-NP CR2E037 (10/03)			
City & State	7	City A State	01. 1	4. FEI Number 01-0688527		Applied For	
<i>-{ma</i> 33/63	Mu forda Country Da Mo	33150	Country Country	5. Certificate of Statu		75 Additional Required	
	5. Name and Address of Current	Registered Agent	Name	7. Name and Addres	s of New Registered Agen	1	
DORCIUS 1527 NW 1 MIAMI, FL	119 ST	· · · · · · · · · · · · · · · · · · ·	Street Address	Street Address (P.O. Box Number is Not Acceptable)			
	:		City		FL	Zip Code	
	named entity submits this statement follows of registered agent. Signature, typed or printed name of registered agent.	N/A	gjaster eta errippe di Foggiste. Registered Agent signature require		DATE	a was, and accept	
D	Filing Fee is \$61.25 ue by September 8, 2004	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees	Make check pa Florida Departme		
10.	OFFICERS AND DI	RECTORS Delete	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIRECT	FORS IN 10 Change	
NAME STREET ADDRESS CITY-ST-ZIP	DORCIUS, ELIE 1177 NW 105 TERR MIAMI, FL 33150	_ Ola	NAME STREET ADDRESS CITY-ST-ZIP		٥		
HILE NAME STREET ADDRESS CITY-ST-ZIP	DS GEORGES, MIREILLE 1059 NW 65 ST MIAMI, FL 33150	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	DT SAINTVIL, MARGARETTE 136 NE 119 ST MIAMI, FL-33161	☐ Detete	TITLE NAME STREET ADDRESS -CITY-SI-ZIP-			Change	
TITLE	-	- 🗍 Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		. 0	Change - Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		🗀 Deleta	TITLE NAME STREET ADORESS CITY-ST-ZIP			Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		C) Delete	NAME STREET ADDRESS CITY-ST-ZIP			Change Addition	
12. I hereby indicated	certify that the information supplied wit I on this report or supplemental report	th this filing does not qualify for this true and accurate and that my	ne exemption stated in S r signature shall have the	Section 119.07(3)(i), Florid same legal effect as if n	da Statutes. I further certify that am a	nat the information n officer or director	