

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90244 030 ****75.00

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1. Entity Name
EGLISE DE DIEU DU BON SAMARITAIN INC.

Principal Place of Business
7183 NW 7 AVE
MIAMI, FL 33150

Mailing Address
520 N.W. 124TH STREET
MIAMI, FL 33168

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2. Principal Place of Business
7183 NW 7 AVE
 Suite, Apt. #, etc.

3. Mailing Address
14691 NW 16 DR
 Suite, Apt. #, etc.

03222006 Chg-NP CR2E037 (11/05)

City & State
MIAMI FL.

City & State
MIAMI FL.

4. FEI Number
74-3043523

Applied For
 Not Applicable

Zip
33150

Country
DADE

Zip
33167

Country
DADE

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

6. Name and Address of Current Registered Agent

PIERRE, ANDRE
550 N.E. 124TH STREET
MIAMI, FL 33138

7. Name and Address of New Registered Agent

Name
MANECE FARELUS
 Street Address (P.O. Box Number is Not Acceptable)
14691 NW 16 DRIVE
 City
MIAMI FL Zip Code
33167

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 *Manece Farelus*

3-22-06

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, 2006

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
PRES Delete
 NAME
JULES, JOSEPH
 STREET ADDRESS
520 N.W. 127TH STREET
 CITY-ST-ZIP
MIAMI, FL 33168

TITLE
PRES Change Addition
 NAME
MANECE FARELUS
 STREET ADDRESS
14691 NW 16 Drive
 CITY-ST-ZIP
MIAMI, FL 33167

TITLE
VP Delete
 NAME
WALKER, IMMACULA
 STREET ADDRESS
14237 MEMORIAL HIGHWAY
 CITY-ST-ZIP
MIAMI, FL 33160

TITLE
VP Change Addition
 NAME
PERETTE FARELUS
 STREET ADDRESS
14691 NW 16 Drive
 CITY-ST-ZIP
MIAMI, FL 33167

TITLE
TREA Delete
 NAME
JEAN-BAPTISTE, ELISSAGE
 STREET ADDRESS
14410 N.W. 16TH AVENUE
 CITY-ST-ZIP
MIAMI, FL 33167

TITLE
TREA Change Addition
 NAME
CELI ADELHOMME
 STREET ADDRESS
7183 NW 7 AVE
 CITY-ST-ZIP
MIAMI, FL 33150

TITLE
SEC Delete
 NAME
JEAN-BAPTISTE, COLY
 STREET ADDRESS
14410 N.W. 16TH AVENUE
 CITY-ST-ZIP
MIAMI, FL 33167

TITLE
SEC Change Addition
 NAME
EMMANUELLA GARDNER
 STREET ADDRESS
540 NE 68 Street
 CITY-ST-ZIP
MIAMI, FL 33150

TITLE
TRUS Delete
 NAME
PETION, PROSPER
 STREET ADDRESS
477 N.E. 71 STREET
 CITY-ST-ZIP
MIAMI, FL 33138

TITLE
TRUS Change Addition
 NAME
WESNER SIMON
 STREET ADDRESS
1110 NW 126 Street
 CITY-ST-ZIP
MIAMI, FL 33168

TITLE
AS Delete
 NAME
ST-HUBBERT, CARLOS
 STREET ADDRESS
245 N.W. 144TH STREET
 CITY-ST-ZIP
MIAMI, FL 33168

TITLE
AS Change Addition
 NAME
SOLINE DAUX
 STREET ADDRESS
10400 NW 5 AVE
 CITY-ST-ZIP
MIAMI, FL 33150

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Manece Farelus*

3-22-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #