2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000005093

FILED Jun 13, 2012 Secretary of State

Entity Name: EGLISE BAPTISTE HAITIENNE DE SALEM INC.

Current Principal Place of Business: New Principal Place of Business:

519 TOCCOA RD 6300 SUMMIT BLVD

WEST PALM BEACH, FL 33413 WEST PALM BEACH, FL 33415

Current Mailing Address: New Mailing Address:

519 TOCCOA RD

WEST PALM BEACH, FL 33413

FEI Number: 54-2064140 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHARLES, GOMERE REV.

519 TOCCOA RD 519 TOCCOA RD

WEST PALM BEACH, FL 33413 US WEST PALM BEACH, FL 33413 US

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: GOMERE CHARLES 06/13/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: PD

Name: CHARLES, GOMERE Address: 519 TOCCOA ROAD

City-St-Zip: WEST PALM BEACH, FL 33413

Title: D

Name: ROSIER, JEAN Address: 5342 VICTORIA CIRCLE

City-St-Zip: WEST PALM BEACH, FL 33409

Title: T

Name: LOUISSAINT, GLADYS Address: 5723 ORCHARD WAY

City-St-Zip: WEST PALM BEACH, FL 33407

Title: S

 Name:
 JEAN-BAPTISTE, MILCA

 Address:
 337 STARFLOWER STREET

 City-St-Zip:
 PORT SAINT LUCIE, FL 33426

Title:

Name: SENAT, PIERRE M

Address: 5903 TIMBERVALLEY DRIVE
City-St-Zip: LAKE WORTH, FL 33464

I hereby 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 all other like empowered.

SIGNATURE: GOMERE CHARLES REV 06/13/2012