


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90409 017 ****61.25

DOCUMENT # N02000007609	
1. Entity Name COMPASSION DE JESUS, INC.	

Principal Place of Business 41 NE 173 ST N. MIAMI BEACH, FL 33162	Mailing Address 41 NE 173 ST N.M.B. FL 33162
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40076160



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04042006 Chg-NP CR2E037 (11/05)

4. FEI Number NOT APPLICABLE		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent AMERICA HOME INVESTMENTS, CORP. 6034 SW 24 ST MIAMI, FL 33155		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____
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. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
T NAME PREVILLON, IMALES STREET ADDRESS 41 NE 173 ST CITY-ST-ZIP N.M.B., FL 33162	<input type="checkbox"/> Delete	Rutherford Saint-cyr (S) 41 NE 173 ST N.M.B. FL 33162	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D NAME MONDESIR, MARIE M STREET ADDRESS 41 NE 173 ST CITY-ST-ZIP MIAMI, FL 33162	<input type="checkbox"/> Delete	Fernand Dattus 41 NE 173 ST N.M.B. FL 33162	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
S NAME DECANAL, MARIE J STREET ADDRESS 41 NE 173 ST CITY-ST-ZIP MIAMI, FL 33162	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
D NAME FERNAND, DATTUS STREET ADDRESS 41 NE 173 STREET CITY-ST-ZIP MIAMI, FL 33162	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Marie Myrthe Mondesir 4/18/06 305 654-8401
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT
40076160
Division of Corporations

Annual Report

Annual Report Help

Document Number

N02000007609

Business Entity Name

COMPASSION DE JESUS, INC.

FEI Number

11-3656-196

FEI Number Status

☒ Listed Above ☐ Applied For ☒ Not Applicable

Certificate of Status Desired

☐ Yes ☒ No \$8.75 each

Election Campaign Financing Trust Fund Contribution

☐ Yes ☒ No

Principal Place of Business

Address

41 NE 173 ST

Suite, Apt. #, etc.

City, State

N. MIAMI BEACH

FL

Zip Code & Country

33162

Mailing Address

Address

41 NE 173 ST

Suite, Apt. #, etc.

City, State

N.M.B

FL

Zip Code & Country

33162

Name and Address of Registered Agent

Name (Last, First, Middle, Title)

- OR -

Business to serve as RA

AMERICA HOME INVESTMENTS, CORP.

Address (PO Box is not acceptable)

6034 SW 24 ST

Suite, Apt. #, etc.

City, State

MIAMI

FL

Zip Code & Country

33155

US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business

entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title	D		
Name (Last, First, Middle, Title)	Mondesir	Marie	M
- OR -			
Entity Name to serve as Officer/Director			
Street Address	41 NE 173 ST		
City, State	N.M.B.	FL	
Zip Code & Country	33162		
Title	AD		
Name (Last, First, Middle, Title)	Previllon	Imales	
- OR -			
Entity Name to serve as Officer/Director			
Street Address	41 NE 173 ST		
City, State	MIAMI	FL	
Zip Code & Country	33162		
Title	S		
Name (Last, First, Middle, Title)	Saint-Cyr	Rutherford	
- OR -			
Entity Name to serve as Officer/Director			
Street Address	41 NE 173 ST		
City, State	MIAMI	FL	
Zip Code & Country	33162		
Title	T		

Division of Corporations

ATTACHMENT

40076160

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#NO2000081609

Name (Last, First, Middle, Title)

FERNAND

DATTUS

- OR -

Entity Name to serve as
Officer/Director

Street Address

41 NE 173 STREET

City, State

MIAMI

FL

Zip Code & Country

33162

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

Marie Myrthe Mondesir

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

Continue

Reset

ATTACHMENT

40076160

Start Over

#NO2000027609

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