

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000208

FILED
Apr 01, 2009
Secretary of State

Entity Name: GRACE OF GOD BY FAITH IN CHRIST INC. (EGLISE LA GRACE DE DIEU PAR LA FOI, EN CHRIST)

Current Principal Place of Business:

1315 NW 112TH TERRACE
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

1315 NW 112TH TERRACE
MIAMI, FL 33168

New Mailing Address:

FEI Number: 26-2476899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORDON, RON ESQ.
335 N.W. 54TH ST.
MIAMI, FL 33127 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAPAIX, ALENE
Address: 1315 NW 112TH TERRACE
City-St-Zip: MIAMI, FL 33167

Title: VP () Delete
Name: LAPAIX, NEWSOUL
Address: 1315 N.W. 112TH TERR.
City-St-Zip: MIAMI, FL 33167

Title: ADM () Delete
Name: JEAN-GLAUDE, ANDRE
Address: 7933 FAIRWAY BLVD.
City-St-Zip: MIAMAR, FL 33023

Title: T () Delete
Name: SALOMON, ALMANAISE
Address: 12025 NW 17 AVE
City-St-Zip: MIAMI, FL 33167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: NEWSOUL LAPAIX

VP

04/01/2009

Electronic Signature of Signing Officer or Director

Date