

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004060

FILED
Apr 26, 2006
Secretary of State

Entity Name: CHRIST ASSEMBLY, INC.

Current Principal Place of Business:

2011 NE 2ND TERR.
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

2011 NE 2ND TERR.
POMPANO BEACH, FL 33060 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORSAINVAL, EDELYNE
9974 NANDINA STREET
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

DORSAINVAL, EDELYNE
2011 NE 2ND TERRACE
POMPANO BEACH, FL 33060 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: EDELYNE DORSAINVAL

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DORSAINVAL, WIDMARCK
Address: 9974 NANDINA STREET
City-St-Zip: MIRAMAR, FL 33025 US

Title: VP () Delete
Name: DORSAINVAL, EDELYNE
Address: 9974 NANDINA STREET
City-St-Zip: MIRAMAR, FL 33025 US

Title: ST () Delete
Name: MASSILLON, ROSE MARJORIE
Address: 810 SW 63RD WAY
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DORSAINVAL, WIDMARCK
Address: 2011 NE 2ND TERRACE
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: VP (X) Change () Addition
Name: DORSAINVAL, EDELYNE
Address: 2011 NE 2ND TERRACE
City-St-Zip: POMPANO BEACH, FL 33060 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: WIDMARCK DORSAINVAL

P

04/26/2006

Electronic Signature of Signing Officer or Director

Date