2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# N03000009944

Entity Name: MINISTERE DE LA PIERRE ANGULAIRE, INC.

Current Principal Place of Business:

461 SW 53RD AVE.
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 121001
FT. LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 20-0488785 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PIERRE, FARAH
461 SW 53RD AVE.
PLANTATION, FL 33317

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:	DP	( ) Delete
Name:	PIERRE, FARAH	
Address:	461 SW 53RD AVE.	
City-St-Zip:	PLANTATION, FL 33317	
Title:	D	( ) Delete
Name:	MORANCY, PHANISE	
Address:	3291 NW 37TH ST.	
City-St-Zip:	LAUDERDALE LAKES, FL 33309	
Title:	D	( ) Delete
Name:	TANIS, JEREMIE	
Address:	4841 NW 11TH CT.	
City-St-Zip:	LAUDERHILL, FL 33313	
Title:	D	( ) Delete
Name:	MORANCY, WANDA	
Address:	3291 NW 37TH ST.	
City-St-Zip:	LAUDERDALE LAKES, FL 33309	
Title:	D	( ) Delete
Name:	PIERRE, RODLEIN	
Address:	461 SW 53RD AVE.	
City-St-Zip:	PLANTATION, FL 33317	
Title:	D	( ) Delete
Name:	OPON, MYRLINE	
Address:	NO. 5 RUE DOCTEUR JEAN BATHOLY-RUELLE DROU	
City-St-Zip:	PORT-AU PRINCE, HAITI WLI.,	

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:	
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 for the exemption stated in Section 119.07(3)(i), 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: FARAH PIERRE PRES 04/30/2004

Electronic Signature of Signing Officer or Director — Date