2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009944

Entity Name: MINISTERE DE LA PIERRE ANGULAIRE, INC.

Apr 27, 2006 Secretary of State

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

461 SW 53RD AVE. 11651 NW 6TH PLACE

PLANTATION, FL 33317 PLANTATION, FL 33325 US

Current Mailing Address: New Mailing Address:

P. O. BOX 121001 P. O. BOX 121001

FT. LAUDERDALE, FL 33312 FT. LAUDERDALE, FL 33312 US

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

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

PIERRE, FARAH PIERRE, FARAH 461 SW 53RD AVE 11651 NW 6TH PLACE

PLANTATION, FL 33317 US US PLANTATION, FL 33325

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: FARAH PIERRE 04/27/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete (X) Change () Addition

PIERRE, FARAH PIERRE, FARAH Name: Name: 461 SW 53RD AVE. Address: 11651 NW 6TH PLACE Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: PLANTATION, FL 33325 US

Title: Title: (X) Change () Addition () Delete

MORANCY, PHANISE MORANCY, PHANISE Name: Name: Address: 3291 NW 37TH ST. Address: 3291 NW 37TH ST.

City-St-Zip: LAUDERDALE LAKES, FL 33309 City-St-Zip: LAUDERDALE LAKES, FL 33309 US

Title: () Delete Title: (X) Change () Addition TANIS, JEREMIE Name: TANIS, JEREMIE Name: Address: 4841 NW 11TH CT. Address: 4841 NW 11TH CT.

City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: LAUDERHILL, FL 33313 US

Title: () Delete Title: (X) Change () Addition

MORANCY, WANDA MORANCY, WANDA Name: Name: 3291 NW 37TH ST. Address: 3291 NW 37TH ST. Address: LAUDERDALE LAKES, FL 33309 LAUDERDALE LAKES, FL 33309 US

City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change () Addition PIERRE, RODLEIN PIERRE, RODLEIN Name: Name:

11651 NW 6TH PLACE 461 SW 53RD AVE. Address: Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: PLANTATION, FL 33325 US

Title: (X) Delete Title: () Change () Addition

OPON. MYRLINE Name: Name: Address: NO. 5 RUE DOCTEUR JEAN BATHOLY-RUELLE DROU Address: PORT-AU PRINCE, HAITI WLI., City-St-Zip: 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: FARAH PIERRE Ρ 04/27/2006