2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003884

FILED May 12, 2008 Secretary of State

Entity Name: EGLISE EVANGELIQUE BAPTISTE DE LA PROVIDENCE, INC

Current Principal Place of Business: New Principal Place of Business: 101 NW 86 STREET MIAMI, FL 33150 **Current Mailing Address: New Mailing Address:** P.O. BOX 4293 HALLANDALE, FL 33008 FEI Number: 81-0652147 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARMAND, AUGEREAU J 101 NWV 86 STREET MIAMI, FL 33150 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ARMAND, AUGEREAU J Name: Name: 101 NW 86 STREET Address: Address: City-St-Zip: MIAMI, FL 33150 City-St-Zip: Title: Title: VΡ () Delete (X) Change () Addition Name: BLAISE, ALIX Name: BLAISE, ALIX Address: 5826 POLK STREET #A Address: 6216 WASHINGTON STREET #1A City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: HOLLYWOOD, FL 33023 Title: () Delete Title: (X) Change () Addition MOMPOINT, GUY B COULANGE, BEZE Name: Name: 1807 ADVENTURE PL 1453 NW 50 STREET Address: Address: City-St-Zip: N LAUDERDALE, FL 33068 City-St-Zip: MIAMI, FL 33142 Title: () Delete Title: (X) Change () Addition Name: BLAISE, ROSE C Name: BLAISE, ROSE C 6216 WASHINGTON STREET #1A Address: 5826 POLK STREET #A Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: HOLLYWOOD, FL 33023 Title: () Delete Title: () Change () Addition COULANGE, GINETTE J Name: Name: 1453 NW 50 STREET Address: Address: City-St-Zip: MIAMI, FL 33142 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: AUGEREAU J ARMAND P 05/12/2008