


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT # N05000005339 1. Entity Name PREMIERE EGLISE DE DIEU PAR LA FOI, INC.	
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Principal Place of Business 191 NW 84TH STREET MIAMI, FL 33150 US	Mailing Address 1155 N.W. 125TH STREET MIAMI, FL 33168 US
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01032008 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-0484762	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEUS, YVENER PASTOR
 1155 N.W. 125TH STREET
 MIAMI, FL 33168

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000886132
 04/18/08-80043-016 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P DEUS, YVENER PASTOR 1155 N.W. 125TH STREET MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V/P ISRAEL, EPHRAINE 512 N.W. 19TH STREET MIAMI, FL 33136
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/ST EXALAN, LOUIS 1155 N.W. 125TH STREET MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PASTOR YVENER DEUS  Date 1-7-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #