

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007787

FILED
May 07, 2007
Secretary of State

Entity Name: EGLISE EVANGELIQUE LA REDEMPTION / REDEMPTION EVANGELICAL CHURCH INC.

Current Principal Place of Business:

1365 NE 143TH STREET
NORTH MIAMI, FL 33161 US

New Principal Place of Business:

1875 OPALOCKA BLVD
OPALOCKA, FL 33054 US

Current Mailing Address:

16701 NE 21ST AVE., STE. 301
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

16701 NE 21ST AVENUE
301
NORTH MIAMI BEACH, FL 33162 US

FEI Number: 13-4308875 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:

JOSEPH, SAGESSE PASTOR
16701 NE 21ST AVE., STE. 301
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

JOSEPH, SAGESSE PASTOR
16701 NE 21ST AVENUE
301
NORTH MIAMI BEACH, FL 33162 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: _____

05/07/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOSEPH, SAGESSE PASTOR
Address: 16701 NE 21ST AVE., STE. 301
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: VD () Delete
Name: JOSEPH, IDOVY DEACON
Address: 16701 NE 21ST AVE., STE. 301
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: TD () Delete
Name: JOSEPH, MARIE G.
Address: 16701 NE 21ST AVE., STE. 301
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: SD () Delete
Name: VALENTAIN, JEANNITE J.
Address: 16701 NE 21ST AVE., STE. 301
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: JOSEPH G., MAQUILENE
Address: 16701 NE 21ST AVE., STE. 301
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: () Change () Addition
Name:
Address:
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: SAGESSE JOSEPH

REV. _____

05/07/2007

Electronic Signature of Signing Officer or Director

Date