

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007787

FILED  
Sep 07, 2010  
Secretary of State

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

**Current Principal Place of Business:**

1949 NE 172ND ST,  
SUITE 3  
NORTH MIAMI BEACH, FL 33162 US

**New Principal Place of Business:**

**Current Mailing Address:**

1949 NE 172ND STREET  
SUITE 3  
NORTH MIAMI BEACH, FL 33162 US

**New Mailing Address:**

1949 NE 172ND ST,  
SUITE 3  
NORTH MIAMI BEACH, FL 33162 US

**FEI Number:** 13-4308875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOSEPH, SAGESSE PASTOR  
1949 NE 172ND STREET  
SUITE 3  
NORTH MIAMI BEACH, FL 33162 US

**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: PD  
Name: JOSEPH, SAGESSE PASTOR  
Address: 1949 NE 172ND STREET., SUITE 3  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: VD  
Name: JOSEPH, IDOVY DEACON  
Address: 1949 NE 172 STREET , SUITE 3  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: TD  
Name: G. JOSEPH, MAQUILENE TREASUR  
Address: 1949 NE 172ND STREET., SUITE 3  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: SD  
Name: CAROLD, CASIMYR SECRET  
Address: 1949 NE 172ND STREET., SUITE 3  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: MB  
Name: JOSEPH, JEUDY MEMBER  
Address: 1949 NE 172 ST, SUITE 3  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

I hereby 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 all other like empowered.

SIGNATURE: SAGESSE JOSEPH

REV.

09/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date