

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009334

FILED  
Apr 11, 2006  
Secretary of State

Entity Name: CHRISTIAN MOVEMENT TO HELP ALL NATIONS INC.

**Current Principal Place of Business:**

1520 NE 136 ST  
MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

1520 NE 136 ST  
MIAMI, FL 33161

**New Mailing Address:**

FEI Number: 38-3726460

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DOISSAINT, GUANCILENE  
1530 NE 136TH ST #15  
MIAMI, FL 33161 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: P ( ) Delete  
Name: DOISSAINT, MORIL  
Address: 1520 NE 136 ST  
City-St-Zip: MIAMI, FL 33161

Title: V ( ) Delete  
Name: AKCIME, JONAS  
Address: 530 NW 109TH ST  
City-St-Zip: MIAMI, FL 33168

Title: S ( ) Delete  
Name: JEAN-LOUIS, MARIE  
Address: 8840 NE 2ND AVE APT 4  
City-St-Zip: MIAMI, FL

Title: T ( ) Delete  
Name: DORLEAN, EUNIDE  
Address: 12133 NE 5TH AVE APT 9  
City-St-Zip: MIAMI, FL 33161

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V (X) Change ( ) Addition  
Name: ALCIME, JONAS  
Address: 530 NW 109TH ST  
City-St-Zip: MIAMI, FL 33168

Title: S (X) Change ( ) Addition  
Name: PREVILON, MARIE  
Address: 1800 S GLADES DR. #1  
City-St-Zip: MIAMI BEACH, FL 33162

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

Title: S ( ) Change (X) Addition  
Name: DOISSAINT, GUANCILENE  
Address: 1530 NE 136 STREET, #15  
City-St-Zip: MIAMI, FL 33161

Title: HQ ( ) Change (X) Addition  
Name: JOSEPH, JORESTE  
Address: 18635 NW 10 CT.  
City-St-Zip: MIAMI, FL 33169

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: MORIL DOISSAINT

P

04/11/2006

Electronic Signature of Signing Officer or Director

Date