

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

AMENDED

09-16-2002 90107 043 ****61.25
N05261

DOCUMENT # **N05261**

1. Entity Name

HAITIAN PENTECOSTAL CHURCH OF GOD

02 SEP 20 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

677908

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4321 NE 1st Terrace

3. Mailing Address

121 NE 23rd Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

POMPANO BEACH, FL 33064

City & State

POMPANO BEACH, FL 33060

4. FEI Number

59-2451513

Applied For

Not Applicable

Zip

Country

33064

USA

Zip

Country

33060

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

MICHEL NICOLAS

Street Address (P.O. Box Number is Not Acceptable)

121 NE 23rd Court

City

POMPANO BEACH

FL

Zip Code
3306

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IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/11/2002
DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **POMPANO BEACH, 33060 PD**
STREET ADDRESS
CITY-ST-ZIP **121 NE 23rd COURT**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP**
NAME **PHILOMENE FRANCOIS VP**
STREET ADDRESS
CITY-ST-ZIP **820 NE 43rd STREET
POMPANO BEACH, FL 33064**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD**
NAME **JOSEPHINE MICHEL TD**
STREET ADDRESS
CITY-ST-ZIP **121 NE 23RD COURT
POMPANO BEACH, FL 33060**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD**
NAME **DENORAND GEFFRARD SD**
STREET ADDRESS
CITY-ST-ZIP **2430 NE 3RD AVENUE
POMPANO BEACH, FL 33064**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD**
NAME **JACOB EUGENE SD**
STREET ADDRESS
CITY-ST-ZIP **250 NE 23RD COURT
POMPANO BEACH, FL 33060**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: **MICHEL NICOLAS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/11/2002 (954) 942-5599

CR2E037B (12/01)

Attachment
Dr. #

677908

NOS 261

HAITIAN PENTECOSTAL CHURCH OF GOD
MICHEL NICOLAS/PASTOR
121 NE 23RD COURT
POMPANO BEACH, FL 33060
59-2451513

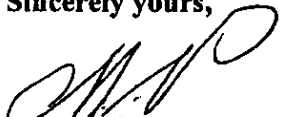
September 11, 2002

To Whom It May Concern:

As the Pastor of this church or institution I am writing this letter to you just to let you know that before any such a change can be done in this organization my signature has to be in it. In the past bad things were going very wrong because during my absence some people who were, in short, members director of the church took bad decision against me while I was away from the country. Since this time as the president of the organization I take this decision.

Thank very much for your fairness, collaboration. help, comprehension and understanding and I hope consideration will be taken.

Sincerely yours,



MICHEL NICOLAS,
PASTOR

