

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007352

FILED
Apr 30, 2012
Secretary of State

Entity Name: ALLIANCE DES EGLISES EVANGELIQUES HAITIENNES DE LA FLORIDE INC.

Current Principal Place of Business:

14697 NE 18 AVE APT #205
NORTH MIAMI BEACH, FL 33181

New Principal Place of Business:

Current Mailing Address:

14697 NE 18 AVE APT #205
NORTH MIAMI BEACH, FL 33181

New Mailing Address:

FEI Number: 65-1314398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACQUES, JULES
14697 NE 18 AVE APT #205
NORTH MIAMI BEACH, FL 33181 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
Name: JACQUES, JULES
Address: 14697 NE 18 AVE APT #205
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: V
Name: KINGSTON, GUERRIER
Address: 525 NE 159 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: S
Name: GENNA, MAGALIE
Address: 750 NE 195 STREET APT 218
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D
Name: ORIZA, JEAN-CLAUDE
Address: 12500 NW 17 PL
City-St-Zip: NORTH MIAMI, FL 33167

Title: T
Name: PLUVIOSE, MARGARETTE
Address: 13340 NW 11TH AVE
City-St-Zip: NORTH MIAMI, FL 33168

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: JULES JACQUES

PRES

04/30/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date