

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012171

FILED  
Apr 29, 2012  
Secretary of State

**Entity Name:** ASSEMBLY OF THE FIRST BORN, INC.

**Current Principal Place of Business:**

14120 N W 7 AVE  
FLORIDA, FL 33168 US

**New Principal Place of Business:**

**Current Mailing Address:**

20481 NW 10TH AVENUE  
HOUSE  
MIAMI GARDENS, FL 33169 US

**New Mailing Address:**

**FEI Number:** 80-0398939

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GASPARD, MAXON DR.PAST  
20481 NW 10TH AVENUE  
HOUSE  
MIAMI GARDENS, FL 33169 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/O  
Name: GASPARD, MAXON BISHOP  
Address: 20481 NW 10TH AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33169 US

Title: VP/D  
Name: KETANT, YVROSE  
Address: 4734 SW 175 WAY  
City-St-Zip: MIRAMAR, FL 33029 US

Title: O/D  
Name: JOSEPH, J. JOSEPH M  
Address: 20481 NW 10TH  
City-St-Zip: MIAMI, FL 33169 US

Title: TREA  
Name: VOLTAIRE, GUERLINE  
Address: 20481 NW  
City-St-Zip: MIAMI GARDENS, FL 33169 US

Title: SEC  
Name: GUERLINE, VOLTAIRE G  
Address: 20481 NW 10TH AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33169 US

Title: VP2  
Name: LAUTURE, BERNARD MINIST.  
Address: 3578 FOWLER STREET  
City-St-Zip: FORT MYERS, FL 33901 LE

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: DR. GSAPARD MAXON, BISHOP, OVERSEER

PRES

04/29/2012

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

\_\_\_\_\_  
Date