2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2009
Secretary of State

DOCUMENT# N08000000677

Entity Name: NEW BEGINNING CHURCH OF DELIVERANCE OF ALL NATION OF LITTLE HAITI, INC.

Current Principal Place of Business:

6319 NW 2ND AVE.
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

6319 NW 2ND AVE.
MIAMI, FL 33150

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JACQUES CLOTAIRE, JEAN L.
6319 NW 2ND AVE.
MIAMI, FL 33150 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: DP ( ) Delete
Name: JACQUES CLOTAIRE, JEAN L.
Address: 6319 NW 2ND AVE.
City-St-Zip: MIAMI, FL 33150

Title: DV ( ) Delete
Name: CARTY, CHARLES E.
Address: 6319 NW 2ND AVE.
City-St-Zip: MIAMI, FL 33150

Title: DT ( ) Delete
Name: PIERRE, ANTONIO
Address: 6319 NW 2ND AVE.
City-St-Zip: MIAMI, FL 33150

Title: DS ( ) Delete
Name: LATORTUE, GERTHA
Address: 6319 NW 2ND AVE.
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: DS (X) Change ( ) Addition
Name: DUFONT, MARIOLENE
Address: 778 NW 41 ST
City-St-Zip: MIAMI, FL 33127

I hereby certify that the information supplied with this filing does not qualify 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: CLOTAIRE, JAQUES DP 03/05/2009

Electronic Signature of Signing Officer or Director — Date