

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003036

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: EBEN-EZER INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

6641 FICUS DR  
MIRAMAR, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

6641 FICUS DR  
MIRAMAR, FL 33023

**New Mailing Address:**

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

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

TOUSSAINT, ETIENNE O  
6641 FICUS DR  
MIRAMAR, FL 33023 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: C ( ) Delete  
Name: TOUSSAINT, ETIENNE O  
Address: 6641 FICUS DR  
City-St-Zip: MIRAMAR, FL 33023

Title: T ( ) Delete  
Name: GARCON, RENETTE  
Address: 445 NE 90 ST  
City-St-Zip: MIAMI, FL 33138

Title: S ( ) Delete  
Name: JOSEPH, CECILE  
Address: 10461 NW 7 AVE  
City-St-Zip: MIAMI, FL 33161

Title: D ( ) Delete  
Name: MANUEL, DIEUSEUL  
Address: 450 NE 114 ST  
City-St-Zip: MIAMI, FL 33161

Title: D ( ) Delete  
Name: ST. PAUL, OMANES J  
Address: 752 NW 77 TER  
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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

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: ETIENNE TOUSSAINT

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date