

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004542

FILED
Apr 28, 2009
Secretary of State

Entity Name: EGLISE EVANGELIQUE DE LA TRINITE, INC.

Current Principal Place of Business:

14425 N.E. 6TH AVE
APT. # 213
N. MIAMI, FL 33161 US

New Principal Place of Business:

13930 NW 22ND AVE
OPA LOCKA, FL 33054 US

Current Mailing Address:

NATHAN JOSEPH P.O. BOX 681405
MIAMI, FL 33168 US

New Mailing Address:

FEI Number: 30-0551743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOSEPH, NATHAN PASTOR
14425 N.E. 6TH AVE
APT. # 213
N. MIAMI, FL 33161 US

Name and Address of New Registered Agent:

JOSEPH, NATHAN PASTOR
13930 NW 22ND AVE
OPA LOCKA, FL 33054 US

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: NATHAN JOSEPH

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOSEPH, NATHAN
Address: 14425 N.E. 6TH AVE APT. # 213
City-St-Zip: N. MIAMI, FL 33161 US

Title: VP () Delete
Name: ROMILUS, PATRICK
Address: 14425 N.E. 6TH AVE APT. # 403
City-St-Zip: N. MIAMI, FL 33161 US

Title: SEC () Delete
Name: PREVIL, CHIMENE
Address: 14425 N.E. 6TH AVE APT. # 213
City-St-Zip: N. MIAMI, FL 33161 US

Title: TRES (X) Delete
Name: FANFAN, LILA
Address: 1010 N.W. 144TH ST
City-St-Zip: MIAMI, FL 33168 US

Title: TRES (X) Delete
Name: JOSEPH, CECILE
Address: 202 N.W. 67TH ST
City-St-Zip: MIAMI, FL 33150 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOSEPH, NATHAN
Address: 13930 NW 22ND AVE
City-St-Zip: OPA LOCKA, FL 33054 US

Title: SEC (X) Change () Addition
Name: ELYSEE, NICE
Address: 12600 W RANDALL PARK DR
City-St-Zip: MIAMI, FL 33167 US

Title: TRES (X) Change () Addition
Name: JOSEPH, CECILE
Address: 202 NW 67TH ST
City-St-Zip: MIAMI, FL 33150 US

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: NATHAN JOSEPH

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date