

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009943

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** TABERNACLE CHRIST EST LE ROCHER INC.

**Current Principal Place of Business:**

1190 NW 92 AVE.  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

1190 NW 92 AVE.  
PEMBROKE PINES, FL 33024

**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:**

FABIEN, DANIEL  
1190 NW 92 AVE.  
PEMBROKE PINES, FL 33024    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: FABIEN, DANIEL  
Address: 1190 NW 92 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: S  
Name: FABIEN, MONIQUE D  
Address: 1190 NW 92 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: T  
Name: JEAN-FRANCOIS, SCHNEIDER  
Address: 1190 NW 92 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33024

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: DANIEL FABIEN

P

04/30/2011

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

\_\_\_\_\_ Date