

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000005383

**FILED**  
**Feb 29, 2012**  
**Secretary of State**

**Entity Name:** HARVEST REVIVAL CHURCH INT'L, INC.

**Current Principal Place of Business:**

274 N BABCOCK STREET  
MELBOURNE, FL 32935

**New Principal Place of Business:**

10231 W. SAMPLE ROAD  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

1579 LAS PALMOS DR SW  
PALM BAY, FL 32908

**New Mailing Address:**

4117 COCOPLUM CIRCLE  
COCONUT CREEK, FL 33063

**FEI Number:** 27-2946678

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MICHEL, DOMINIQUE  
1579 LAS PALMOS DR SW  
PALM BAY, FL 32908 US

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

MICHEL, DOMINIQUE  
4117 COCOPLUM CIRCLE  
COCONUT CREEK, FL 33063 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: DOMINIQUE MICHEL

02/29/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MICHEL, DOMINIQUE  
Address: 4117 COCOPLUM CIRCLE  
City-St-Zip: COCONUT CREEK, FL 33063

Title: VP  
Name: MICHEL, MATIA  
Address: 4117 COCOPLUM CIRCLE  
City-St-Zip: COCONUT CREEK, FL 33063

Title: MBR  
Name: KERBY, DUVAL  
Address: 4117 COCOPLUM CIRCLE  
City-St-Zip: COCONUT CREEK, FL 33063

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: DOMINIQUE MICHEL

P

02/29/2012

Electronic Signature of Signing Officer or Director

Date