2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10147

FILED Mar 16, 2007 Secretary of State

Entity Name: EGLISE BAPTISTE D'EXPRESSION FRANCAISE, INC.

Current Principal Place of Business:			New Principal Place of Business:		
3255 NW MIAMI, FL	2 COURT . 33150				
Current Mailing Address:			New Mailing Address:		
P.O BOX MIAMI, FL					
El Numbe	r: 59-2644577	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:	
	R, TCHLER 7 128 STREET . 33168 US				
	e named entity te of Florida.	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	IRE:				
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: City-St-Zip:	SERAPHIM, AN 235 NE 175TH	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
ītle: lame: lddress: Dity-St-Zip:	VP (JEAN-GILLES, 170 NW 121 S MIAMI, FL 331	Т.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Γitle: Name:	ELIMA, NAPOL 575 SW HALIF	AX AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
				() 5 1	
Address: City-St-Zip: Citle: Name: Address: City-St-Zip:	PR (PLANTIN, EDIT 14810 NE 7 CT MIAMI, FL 331	Г.	Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip: Fitle: Name: Address:	PLANTIN, EDIT 14810 NE 7 CT MIAMI, FL 331 S (CHAMPAGNE,	TH F. 161) Delete FLORE MS MEON WAY P-8	Name: Address:	() Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: TCHLER ANTENOR P 03/16/2007