

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jul 25, 2007  
Secretary of State**

DOCUMENT# N18616

**Entity Name:** MIAMI-HAITIAN WESLEYAN CHURCH, INC.**Current Principal Place of Business:**16500 NW 2ND AVE.  
MIAMI, FL 33169 US**New Principal Place of Business:****Current Mailing Address:**15885 NE 2ND AVE  
MIAMI, FL 33162 US**New Mailing Address:**

FEI Number: 65-2221261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**ST HILAIRE, PLANEL  
15885 NE 2ND AVE  
MIAMI, FL 33162 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: PD ( ) Delete  
Name: ST. HILAIRE, PLANEL  
Address: 15885 NE 2ND AVE.  
City-St-Zip: MIAMI, FL 33162Title: VD ( ) Delete  
Name: MONDESTIN, USIE  
Address: 18920 NW 19 AVE.  
City-St-Zip: MIAMI, FL 33056Title: S ( ) Delete  
Name: MYRIAM, PRINCIVIL  
Address: 1045 NE 145 ST.  
City-St-Zip: MIAMI, FL 33161Title: T ( ) Delete  
Name: MONDESTIN, JONAS  
Address: 18920 NW 19 AVE.  
City-St-Zip: MIAMI, FL 33056Title: T ( ) Delete  
Name: ARISTIDE, MISROSE  
Address: 1025 NE E135 ST.  
City-St-Zip: MIAMI, FL 33161Title: T ( ) Delete  
Name: DANIEL, DESRONVIL  
Address: 1115 NE 155 ST.  
City-St-Zip: MIAMI, FL 33162**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: VD (X) Change ( ) Addition  
Name: SAINVIL, ASTENSIE  
Address: 15885 NE 2ND AVE  
City-St-Zip: MIAMI, FL 33162Title: ( ) 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: PLANEL ST. HILAIRE

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07/25/2007

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