

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N18616

FILED  
Apr 12, 2003  
Secretary of State

Entity Name: MIAMI-HAITIAN WESLEYAN CHURCH, INC.

**Current Principal Place of Business:**

922 NW 119TH ST  
SUITE 922  
MIAMI, FL 33168 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 HILLAIRE, 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: D ( ) Delete  
Name: ST. HILAIRE, ALPHONSE  
Address: 731 LONG ISLAND AVE.  
City-St-Zip: FT. LAUDERDALE, FL

Title: PD ( ) Delete  
Name: ST. HILAIRE, PLANEL  
Address: 15885 NE 2ND AVE  
City-St-Zip: MIAMI, FL

Title: VD ( ) Delete  
Name: SAINVIL, ASTENIE  
Address: 535 NW 111ST  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: CHANTAL, EMILE  
Address: 1840 S GLADE DR  
City-St-Zip: MIAMI BEACH, FL

Title: TD ( ) Delete  
Name: PREVENU, ERMILUS  
Address: 12515 NW 18TH CT  
City-St-Zip: MIAMI, FL

Title: TR ( ) Delete  
Name: PROLYTE, DELINCE  
Address: 15800 NE 14TH CT  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) 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:

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 for the exemption stated in Section 119.07(3)(i), 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

PD

04/12/2003

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

\_\_\_\_\_  
Date