

FILE NOW: FILING FEE IS \$61.25

FILED

May 08 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N18660 (3)**

1. Corporation Name  
**EMMAUS BAPTIST MISSION, INC.**



Principal Place of Business <b>840 N.W. 100 STREET MIAMI FL 33150 US</b>	Mailing Address <b>840 N.W. 100 STREET MIAMI FL 33150-1533 US</b>
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3. Date Incorporated or Qualified <b>01/08/1987</b>	3a. Date of Last Report <b>04/22/1996</b>
4. FEI Number <b>65-0233577</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29 30

9. Name and Address of Current Registered Agent

**DESIR, QUEBOT  
846 N.W. 100 STREET  
MIAMI FL 33150**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	<b>JEAN-HILAIRE, FELIX</b>	
STREET ADDRESS	<b>1071 NW 141 STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	<b>JEAN-HILAIRE, JEANNETTE</b>	
STREET ADDRESS	<b>1071 NW 141 STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	<b>NEU N. SIMILIEN</b>	
STREET ADDRESS	<b>9150 N. W. 7TH AVE 304</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE	T	<input type="checkbox"/> DELETE
NAME	<b>DAUPHIN, AGNES</b>	
STREET ADDRESS	<b>12145 N.W. 4TH AVENUE</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<b>SD NEUF N. SIMILIEN</b>
3.3 STREET ADDRESS	<b>9150 N.W 7TH AVE #304</b>
3.4 CITY-ST-ZIP	<b>MIAMI, FLA.</b>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<b>T Altenise Pierre</b>
4.3 STREET ADDRESS	<b>15015 H.E 10TH AVE</b>
4.4 CITY-ST-ZIP	<b>MIAMI, FL. 33161</b>
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jean-Hilaire Felix Date: 4-28-97

Daytime Phone # 0030824

CR2E037 (9/96)