FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED
Mar 27 1998 8:00am
Secretary of State

DOCUI	MENT# N1866	SO (3)				
EMMAUS BAPTIST MISSION, INC.				[
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					ĺ	
Principal Place of Business		Mailing Address				
840 N.W. 100 STREET		840 N.W. 100 STREET		3. Date Incorporated or Qualified		
MAMI FL 33150 US		Miami FL 33150 US		01/08/1987		
				4. FEI Number Applied For		
2. Principal Place of Business		2a. Mailing Address		65-0233577 Not Applicat	ole	
21		26		5. Certificate of Status Desired S8.75 Additional Fee Regulred		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Election Campaign Financing \$5.00 May Be	_	
22		27		Trust Fund Contribution Added to Fees		
City & State		City & State		7. Is this nonprofit corporation a homeowners association? Yes \(\subseteq \text{No} \)		
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year intangible		
24	9. Name and Address of Curre		30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
	3. (Yame and Address of Curre	ur uedisteten wheur	81 Name		_	
DESIR, QUEBOT				Address (P.O. Box Number is Not Acceptable)		
846 N.W. 100 STREET				35 N.E 126 Stuet		
MAMI F	L 33150					
			64 City	Miami FL 85 Zip Code 33167		
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 re office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered ag	Senat, Reyno	1 d Registered Appli signature	DATE DATE	_	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	DELETE	1.1 TITLE	Change Addit	on	
NAME	JEAN-HILAIRE, FELIX		1.2 NAME	ENEW EINTH AVE		
STREET ADDRESS	1071 NW 141 STREET		1.3 STREET ADDRESS	15015 N. E 10Th AVE Miami, FC. 33161		
CITY-ST-ZIP	MIAMI FL VD	DELETE	1.4 CITY-ST-ZIP	Machange ☐ Additi	on.	
TITLE NAME	JEAN-HILAIRE, JEANNETTE		2.1 TITLE 2.2 NAME		UII	
STREET ADDRESS	1071 NW 141 STREET		2.2 NAME 2.3 STREET ADORESS	15015 N. E 10 Th AVE Mi Ami, FL. 33161		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP	Miami FL. 33/61		
TITLE	SD	DELETE	3.1 TITLE	Change Additi	on	
NAME	NEUF, N S		3.2 NAME			
STREET ADDRESS	9150 N. W. 7TH AVE 304		3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL	·	3.4. CITY-ST-ZIP			
TITLE	T	☐ DELETE	4.1 TITLE	Change ∐ Additi	οn	
NAME	PIERRE, ALTENISE		4. 2 NAME	1001101 = 1205t:		
STREET ADDRESS	15015 NE 10TH AVE		4.3 STREET ADDRESS	2040 N.E 1705t. Miamij F2. 33162		
CITY-ST-ZIP	MIAMI FL	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		OD.	
NAME			5.2 NAME	, south		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Additi	on	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		Ì	
CITY-ST-ZIP			6.4 CITY-ST-ZIP		_	

I 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 eath; 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.

Jean-Hilaine, Felix