**FILE NOW: FILING FEE IS \$61.25** NPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthsm \*
Secretary of State

DIVISION OF CORPORATIONS

1997 DOCUMENT #

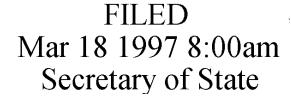
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(3)

EGLISE BAPTISTE BETHANIE DE FT. LAUDERDALE, INC.

Principal Place of Business

Mailing Address



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2200 NW 12 AV FT. LAUDERDAI		2200 NW 12 AVENUE FT. LAUDERDALE FL 33311-3627													
											corporated of /07/1988	r Qualified	3a. [	Date of Last I	Report 996
2. Principal Place of Business					2a. Mailing Address					4. FEI Nur	· · · · · · · · · · · · · · · · · · ·		ــــــــــــــــــــــــــــــــــــــ		applied For
21		<del></del>	26					65	-0038136			h	lot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						- ~					Additional		
22		27					'	b. Certifica	ate of Status	Desired	ш		tequired		
City & State	е	City & State						6. Election	Campaign F	inancing		\$5.00	May Be		
23		28						Trust Fu	ind Contribut	ion			to Fees		
Zip		⊢°	ountry	<u> </u>	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,							
24	0 Memo	25	Address of Current	29						Florida Statutes Yes No  10. Name and Address of New Registered Agent					
<del></del>	9, 1401110	ano ,	COCIOSS OI CUITOII	81 Name											
NOI ED ALIQUETE								- Name							
USLER AUGUSTE 4521 NW 5TH PLACE					B2 Street Add				Address	ddress (P.O. Box Number is Not Acceptable)					
	TION FL 33						83								
CLANIA	HON I'L OL	JJ 17													
							84	City					FL	85 Zip	Code
11. Pursuant	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 a	agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statules.														
SIGNATURE	Signature, typod	f or printe	d name of registered agen	plicable. (NO	TE Registere	d Age	nt signature	e required wh	on reinstaling			DATE			
12.			OFFICERS AND	DIRECTO		13.				ADDITIO	NS/CHANGE	S TO OFFIC	ERS AN		
TITLE	HOLER	ALIO	INTE		☐ DELETË			1.1 TITLE						Change	Addition
NAME	USLER, 4521 NV				1.2 N										
STREET ADDRESS					<b>B</b>			ADDRESS	ļ						{
CITY-ST-ZIP TITLE	PLANTA D	HUN	<u>rL</u>		1.4 C			T-ZIP	- C	<b>2</b>		· C 116	<u> </u>	Change	Addition
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TITLE	1111/1/11			·	DELETE	3.170		51-211	an	du	54.	Ren	M 1 1	Change	Addition
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STREET ADDRESS			AVENUE					3 STREET ADDRESS		30!	100 g	49 S	て・		
CITY-ST-ZIP	FT LAUC		_		3			. CITY-ST-ZIP 5		wi	NW 3 re, F	L 33	332	13	
TITLE	D				DELETE	4.1 TI			1	<del></del>	····	<i>F</i>		Change	☐ Addition
NAME	NORD, \	VERDI	EU			4.21	IAME						*		
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NAME	SAINTIL,	•				5.2 NAME			l						Į
STREET ADDRESS	4351 NE				5.3 ST			ADDRESS							
CITY-ST-ZIP	LAUDER	HILL	<u>FL</u> _					1 - ZIP	<u> </u>			····		···	
TITLE	\$				☐ DELETE	6.1 To								Change	Addition .
, NAME			E-GRACE			6.2 N	AME	ļ				Δi			
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CITY-ST-ZIP	FT LAUC		ALE FL	racialo abojo 4	ling door not are			T-ZIP	stated in S	ection 119 07/31/i) Florida Stati		D ( Q )	o Turth	or corting the	1 the

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 ennual 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 chapted or on an attachment with an address.