2001 UNIFORM BUSINESS REPORT (UBR)

May 17, 2001 8:00 am Secretary of State **DOCUMENT # N26835** 1. Entity Name 05-17-2001 90413 016 ****61.25 EGLISE EVANGELIQUE DE LA BIBLE, INC. Principal Place of Business Mailing Address 500 NORTHWEST 54 ST. 500 NORTHWEST 54 ST. BLDG BLDG MIAMI FL 33127 MIAMI FL 33127 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0130494 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) SATINE, YACINTHE 1068 N.W. 29TH TERRACE **MIAMI FL 33127** City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **FILE NOW:** Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE D ☐ Delete TITLE Change ☐ Addition NAME SATINE, YACINTHE NAME STREET ADDRESS STREET ADDRESS 1068 N.W. 29TH TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete TITLE Addition Change JACQUES, JEANNE NAME STREET ADDRESS STREET ADDRESS 1068 N.W. 29TH TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Delete TITLE Addition ☐ Change NAME KETTLY, SAINTVIL NAME STREET ADDRESS 1068 N.W. 29TH TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete TITLE ☐ Change Addition JEAN, FRANCOISE NAME STREET ADDRESS STREET ADDRESS 130 N.E. 49 ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Delete TITLE ☐ Change ■ Addition NAME PIERRE, VIERGELA NAME STREET ADDRESS 1203 N.W. 65 TERR. STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.