

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31044

FILED
Apr 29, 2008
Secretary of State

Entity Name: EGLISE EVANGELIQUE HAITIENNE SILOE, INC.

Current Principal Place of Business:

1760 NW 38TH AVENUE
LAUDERHILL, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 5962
FT. LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 65-0127673 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DOMINIQUE, MARC
3440 N.W. 37TH STREET
LAUDERDALE LAKES, FL 33309 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: PD () Delete
Name: DOMINIQUE, MARC,
Address: 3440 NW 37TH STREET
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: VD () Delete
Name: JOSEPH, WHAN S.,
Address: 8901 NW 24TH STREET
City-St-Zip: SUNRISE, FL 33322

Title: SD () Delete
Name: CLERVIL, DIEUJUSTE
Address: 6595 BLVD OF CHAMPION
City-St-Zip: N LAUDERDALE, FL

Title: TD () Delete
Name: JUSLAINE LOUIS,
Address: 511 SW 73RD AVENUE
City-St-Zip: N LAUDERDALE, FL 33068

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JUSLAINE LOUIS

TD

04/29/2008

Electronic Signature of Signing Officer or Director

_____ Date