

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N31724

1. Entity Name
PHILADELPHIA HAITIAN BAPTIST CHURCH, INC.



Principal Place of Business
**2836 N.W. 10TH COURT
FORT LAUDERDALE, FL 33311**

Mailing Address
**PHILADELPHIA HAITIAN BAPTIST CHURCH
7360 N.W. 54 COURT
LAUDERHILL, FL 33319 US**

FILED

05 OCT 18 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09262005 REIN-NP CR2E099 (6/04)

4. FEI Number
65-0201489

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**JOSEPH, ISRAEL
7360 N.W. 54 COURT
LAUDERHILL, FL 33311**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$61.25

After January 1, 2006, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT FOURISMA, AZAEL 6609 BLVD CHAMPION N LAUDERDALE, FL 33068	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ISREAL JOSEPH 7360 N.W. 54TH COURT LAUDERHILL, FL 33319	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOSEPH, CARMELITA (7360 N.W. 54TH COURT LAUDERHILL, FL 33319	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FAURISMA, AZAEL 6909 BLVD OF CHAMPION N LAUDERDALE, FL 33068	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOSIL, GUIRLANDE 220 NW 41ST STREET FT. LAUDERDALE, FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FAURISMA, EXANIE 6609 BLVD CHAMPION N LAUDERDALE, FL 33068	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Faurisimar Azael 1533 S.W. Belmel Ave St. Lucie FL 39953	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	800060725758 10/18/05--01078--001 **70.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Faustin Lubernier 942 S.W. 70 way W. lauderdale FL 33068	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>[Signature]</i>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #