		T CORPORA		v?		ATX1	
DOCUMENT		SS REPORT	(UBR)	7	HED		
Entity Name	π N33019			04 JU	N 29 PM 2: 40		
Full Goenal Assemb	nly of Bighteousnes	s Iп Jes <u>us C</u> hrist, In	^	SECRE TALLAH	TARY OF STATE IASSEE, FLORIDA		
		IN THIS SPA			•		
2. Principal Place of		3. Mailing Address			9 Uo2 O	0/ 12250	
3901 NW 2nd Avenue Suite, Apt #, etc		3146 NW 68 Street Suite, Apt. #, etc,		04-26-2004 11102			
	: 			DO NOT WRITE IN THIS SPACE			
City & State Miami, FL		City & State Ft. Lauderdale, Florida		4. FEI Number 65-0335865		Applied For Not Applicable	
Zip 33127	Country USA	Zip 33309	Country USA	5. Certificate of	Status Desired	\$8.75 Additional	
33,21	<u>IUSA</u>	3309	[編] 法 7.	Name and Ad	dress of Current Re	Fee Required egistered Agent	
			Name Emy Etlenne,	Sr.			
	DG NOT WRITE Street Address				s (P.O. Box Number is Not Acceptable)		
	IN THIS SP	NCE	49 (12 9210	Otleat			
			City	·	F	Zip Code	
8. The above name	d entity submits this s	tatement for the purp	Miami ose of changing its re	aistered office		- 100 100 120	
		n, and accept the obli			or regional a agoin, c		
	mylitane		Pastor Emy Etienn	e, Sr. (3	05)573-2867	4/22/2004	
Signatu	re typed or printed name of regi	stered agent and title if applicable	le. (NOTE: Registered Agent sig	natura radu red when r	einslating) DATE	S. S	
FEE IS Initial or An	\$61.25 pended UBR	9. Election Campa Trust Fund Con		May Be od to Fees	Make Chack Florida Depart	Payable to neint of State	
10.	OFFICERS AND DI		11,			A September 1	
TITLE NAME	President/Senior Pa Emy Etlenne, Sr.	astor/Bisnop	NAME IN INC.				
	749 N.E. 82nd Stree		STREET ADDRE	SS I I I			
CITY-ST-ZIP FITLE	Miami, Florida 3313 Executive Vice Pres		CUM-ST (2)				
NAME	Frantz-Suze Etienn	•	NAME I				
STREET ADDRESS CITY-ST-ZIP	749 N.E. 82nd Stree Miami, Florida 3313		STREET ADDRESS	<b>96</b>			
TITLE	Director/Trustee	10					
NAME	Alfred Tranchant		NĂME! III , III III				
STREET ADDRESS	780 NE. 83rd Street	e''	STREET ADDRE		DONOTW	PITE	
<u>CITY-ST-ZIP</u> TITLE	Miami, Florida 3313  Director/Trustee	<u> </u>	GINY STAIR		Colonia de la constitución de la colonia de	and the second of the second o	
NAME	Gabriel Joseph		NAME		IN THIS SE	AUE	
STREET ADDRESS	811 NE 82nd Terrac		STREET ADDRE	sellit ili jirij			
CITY-ST-ZIP FITLE	Miami, Florida 3313 Director/Trustee	<u> </u>	GITIYASTAZIP		k OP admit is Share	A STATE OF THE STA	
NAME	Jean Paul St. Pharc	1	NAME :				
STREET ADDRESS	12433 NE Miami Co		STREET ADDRE	56)			
CITY-ST-ZIP	North Miami, Florid						
FITLE NAME	Board Advisor/Ex-c		TITLE I			The state of the s	
	3146 NW 68 Street	TO 1 THE P. L. P.	STREET ACCES	sši i i i i i			
CITY-ST-ZIP	Ft. Lauderdale, Flo		OTY-ST-ZIP			The second second	
		is filing does not quality for t I report is true and accurate					
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							

4/22/2004

(305)573-2867 Daylimo Phone #

Block 10 or on an attachment with an address, with all other like empowered.

Emy Etienne, Sr.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR GIRECTOR