



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # N37501 1. Entity Name GRACE BAPTIST CHURCH OF NORTH MIAMI, INC.	
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Principal Place of Business 1200 NW 7TH AVE. P.O. BOX 681844 N. MIAMI, FL 33168-1844	Mailing Address 1200 NW 7TH AVE. P.O. BOX 681844 N. MIAMI, FL 33168-1844
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04142008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0190040	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

DOMINIQUE4, LUC
1075 NW 127 ST
N. MIAMI, FL 33168

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000896908 04/25/08-80021-023 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOMINIQUE, LUC 1075 NW 127 ST MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ALCINDOR, BERNADIN 384 NE 87 ST MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PROPHETE, RICARD 190 NW 101 ST. MIAMI SHORES, FL 33150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIMONE, JOSEPH 12 NE 89 ST. EL PORTAL, FL 331383048
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 fee empowered.

SIGNATURE: Rev. LUC DOMINIQUE 4/14/08 305-681-6807

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #