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May 06 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morthant Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N38764 1. Corporation Name Zion's People of The Family of God, INC.			
Principal Place of Business 1262 NE 146 ST MIAMI, FL 33161		Mailing Address 	
2. Principal Place of Business 21 1262 NE 146 ST Suite, Apt. #, etc.		2a. Mailing Address 26 SAME	
22 City & State 23 MIAMI, FL Zip 24 33161		27 City & State 28 Zip 29 Country 30 USA	
9. Name and Address of Current Registered Agent JEAN EDVA-THEVENIN 1262 NE 146 ST MIAMI, FL 33161		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.			
SIGNATURE: JEAN EDVA-THEVENIN (REV) Jean Edva Thevenin 4/26/97			
12. OFFICERS AND DIRECTORS TITLE P NAME REV. JEAN EDA-THEVENIN STREET ADDRESS 1262 NE 146 ST CITY- ST- ZIP MIAMI, FL 33161 TITLE ST NAME FREDERICK, ST. LOUIS STREET ADDRESS 7201 CORAL BLVD CITY- ST- ZIP MIRAMAR, FL 33023 TITLE D NAME DAYARD, CONSERVE STREET ADDRESS 1262 NE 146 ST CITY- ST- ZIP MIAMI, FL 33161 TITLE D NAME YVES CHENET, HYPOLITE STREET ADDRESS 551 NW 189 TERR. CITY- ST- ZIP MIAMI, FL 33169 TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST- ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST- ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY- ST- ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY- ST- ZIP	
14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: JEAN EDVA-THEVENIN 4/26/97 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

CR2E037 (9/96)