

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 12 1997 8:00am
Secretary of State

DOCUMENT # N-92000000394

1. Corporation Name

Eglise de Dieu Pentecostal
Independent INC.

Principal Place of Business

Miami, FL

Mailing Address

5627 N.E. 20th Ave.
Miami, FL 33137

2. Principal Place of Business

21 Miami, FL

2a. Mailing Address

26 5627 N.E. 20th Ave.
Miami, FL 33137

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 Miami, FL

City & State

28

Zip

24 33137

Country

25 Dade

Zip

29

Country

30 U.S.A

3. Date Incorporated or Qualified

11-18-92

3a. Date of Last Report

N/A

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

Andre Israel Jules
1281 N.W. 116th St
Miami, FL 33148

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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: Andre Israel Jules

4-23-97

Signature typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE: T-Trustee

NAME: Andre Israel Jules

STREET ADDRESS: 1281 N.W. 116th St

CITY-ST-ZIP: Miami, FL 33148

☐ DELETE

TITLE: T-Trustee

NAME: Evelyn Augustin

STREET ADDRESS: 11995 N.W. 76 Ave

CITY-ST-ZIP: Miami, FL 33167

☐ DELETE

TITLE: T-Trustee

NAME: Patrick Germain

STREET ADDRESS: 1921 N. 168 St

CITY-ST-ZIP: North Miami Beach, FL 33162

☐ DELETE

TITLE: T-Trustee

NAME: EUGENE RAYMONDVILLE

STREET ADDRESS: 1281 N.W. 116th St

CITY-ST-ZIP: Miami, FL 33168

☐ DELETE

TITLE:

NAME:

STREET ADDRESS:

CITY-ST-ZIP:

☐ DELETE

TITLE:

NAME:

STREET ADDRESS:

CITY-ST-ZIP:

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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5/12/97

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, upon an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-23-97 (305) 681-9863

CR2E037 (9/96)