

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**APPROVED
AND
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95 MAY -1 AM 11:17

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # N 92000000584 (4)
1. Corporation Name
FIRST HAITIAN BAPTIST CHURCH OF NMB, INC.

Principal Place of Business Mailing Address
**15395 N. MIAMI AVE. 15395 N. MIAMI AVE
N. MIAMI BEACH, FL 33169**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **11-30-92** 3a. Date of Last Report **6/94**

4. FEI Number **APPLIED FOR** Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75** Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2e. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 25 Country 28 Zip 30 Country

9. Name and Address of Current Registered Agent

**TOUSSAINT PIERRE L.
1580 NE 161 ST.
N. MIAMI BEACH, FL. 33162**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **PIERRE L TOUSSAINT** **4-27-95**
Signature of Current Registered Agent and, if applicable, Registered Agent Signature required when reinstating DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JULIEN RONEL REV.	1.2 NAME	
STREET ADDRESS	2175 NE 170 ST. #315	1.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH, FL 33162	1.4 CITY-ST-ZIP	
TITLE	V/D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JULIEN FRANCE	2.2 NAME	
STREET ADDRESS	2175 NE 170 ST. #315	2.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH, FL 33162	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOSEPH CORUCCIVIL	3.2 NAME	
STREET ADDRESS	13800 NE 12 AVE #3018	3.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI FL. 33161	3.4 CITY-ST-ZIP	
TITLE	T/D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOUSSAINT ROSELAINE	4.2 NAME	
STREET ADDRESS	1580 NE 161 ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL. 33162	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: *[Signature]* **RONEL JULIEN** **4/27/95** **(305) 716-0739**
Signature and Typed or Printed Name of Signing Officer or Director Date (Day/Mo/Yr)

AS Per conversation w/ Ronel Julien on 5-15-95 *[Signature]*