FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N920000

N9200000584 (4)

FIRST HAITIAN BAPTIST CHURCH OF N.M.B., INC.

FILED

Apr 21 1997 8:00am

Secretary of State

Principal Place of Business		Mailing Address			Committee and Louis Living Marin and Living	48	
15395 N. MIAMI AVE.		15395 N. MIAMI AVE.					
NORTH MIAMI BEACH FL 33169		NORTH MIAMI BEACH FL 33169-6736		į			
					 Date Incorporated or Qualified 11/30/1992 	3a. Date of Last Report 06/21/1996	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21/539	SN. Himi AVE	26			65-0375062	Not Applicable	
Sulte, Apt.		Suite, Apt. #, etc.				SQ 75 Additional	
22		27			5. Certificate of Status Desired	Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
23 N. HIAMI FC		28			Trust Fund Contribution	Added to Fees	
Zip Country		Zip Country		8. This corporation has liability for	prángible tax under s. 199.032,		
24 33/69 25 8ADE		29 30		Florida Statutes			
	Registered Agent	10. Name and Address of New Registered Agent					
,				B1 Name	Tours I FLATIO	/	
TOUSSAINT, PIERRE L				32 Street	Address (P.O. Boy Number is Not Acceptable	(la)	
1580 N.E. 161TH STREET				81 Name TOUSS Q1 A TOST Q C. 82 Street Address (P.O. Box Number is Not Acceptable) 7580 N = 1675 +			
N. MIAMI BEACH FL 33162			Ī	83			
10. 11.11 01.11	(P. 1011 1 0 10 10 1		Į.		MIANTI Deb. FC	1.15.	
			,	B4 City		FL 85 Zip Code 331/2 と	
11. Pursuant t	o the provisions of Sections 617.0502	2 and 617,1508, Florida Statu	tes, the ab	ove-named	corporation submits this statement for the c	urnose of changing its registered	
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 617.0303. Florida Statutes.							
SIGNATURE Piento C. Toussal 4-7-9 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE						7-7-97 DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITE	E	Julien, RONEL RES	Change	
NAME	JULIEN, RONEL REV.		1.2 NAM	ME	960 NIE ILO EL	. , , ,	
STREET ADDRESS	2175 N.E. 170TH ST.		1.3 STREET ADDRESS		N. HIAMI Beh PL. 33162		
CITY-ST-ZIP	N. MIAMI BEACH FL 33162		1.4 City-St-ZiP		TOTAL BOW TO		
TITLE			2.1 7(1)		VP	Change Addition	
NAME	JULIEN, FRANCE		2.2 NAM	/E	Sulley, France	• -	
STREET ADDRESS	2175 N.E. 170TH ST.			EET ADDRESS	960 NE 160 St		
CITY-ST-ZIP	N. MIAMI BEACH FL 33162		2 4 CITY-ST-ZIP		N. HIBUIL BULLE	5316 2	
TITLE	D	DELETE	3.1 TITLE			Change Addition	
NAME	JOSEPH, COEURCIVIL		3.2 NA			_ , _	
STREET ADDRESS	1352 N.E. 149TH STREET			EET ADDRESS			
CITY-ST-ZIP	N. MIAMI BEACH FL 33162			Y-ST-ZIP			
TITLE	TD	DELETE	4.1 Titu			Change Addition	
NAME	TOUSSAINT, ROSELENE		4. 2 NA				
STREET ADDRESS	1580 N.E. 161ST STREET		1	EET ADDRESS			
	N. MIAMI BEACH FL 33162		1				
CITY-ST-ZIP	N. MIAMI BEACH PL 33102	DELETE	5.1 TITE	Y-ST-ZIP		Change Addition	
TITLE NAME		- Deterie	5.2 NA			- Charge - Thousand	
I I				EET ADORESS		•	
STREET ADDRESS						Į.	
CITY-ST-ZIP	DELETE		6.1 TITI	Y-\$1-ZIP		Change Addition	
TITLE		[] OLICIL				C one do Lagritui	
NAME			6.2 NAM			Į	
STREET ADDRESS				IEET ADDRESS			
CITY-ST-ZIP			6.4 CIT	Y-ST-2IP			

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.

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