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Mar 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000000192 (5)

1. Corporation Name

GOOD SAMARITAN CHURCH OF GOD, INC.



Principal Place of Business	Mailing Address
7183 NW 7TH AVE 1ST FLOOR MIAMI FL 33150 US	7183 NW 7TH AVE 1ST FLOOR MIAMI FL 33150 US

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified	01/15/1993
4. FEI Number	65-0380691
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent	
PETIT-HOMME, SAMUEL R 7183 NW 7 AVE MIAMI FL 33150	

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

12. OFFICERS AND DIRECTORS	
TITLE	PD HOMME, SAMUEL P <input type="checkbox"/> DELETE
NAME	7183 NW 7 AVE
STREET ADDRESS	MIAMI FL 33150
CITY-ST-ZIP	
TITLE	VD FARELUS, MANECE <input type="checkbox"/> DELETE
NAME	10400 NW 5 AVE
STREET ADDRESS	MIAMI FL 33150
CITY-ST-ZIP	
TITLE	MD PETION, PROSPERE <input type="checkbox"/> DELETE
NAME	18 NE 89 ST
STREET ADDRESS	MIAMI FL 33150
CITY-ST-ZIP	
TITLE	TD HYPOLITE, GIZELE <input type="checkbox"/> DELETE
NAME	610 NW 133 ST
STREET ADDRESS	NORTH MIAMI FL
CITY-ST-ZIP	
TITLE	TD REGIS, CARLINE <input checked="" type="checkbox"/> DELETE
NAME	7183 NW 7TH AVE
STREET ADDRESS	MIAMI FL
CITY-ST-ZIP	
TITLE	TD CARLINE REGIS <input checked="" type="checkbox"/> DELETE
NAME	7183 NW 7TH AVE
STREET ADDRESS	MIAMI FL
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	TD Jean-Baptiste, Coly Carline
5.3 STREET ADDRESS	1351 NE 118 St.
5.4 CITY-ST-ZIP	Miami, FL 33161
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	TD Elissage Jean-Baptiste
6.3 STREET ADDRESS	1351 NE 118 St
6.4 CITY-ST-ZIP	Miami, FL 33161

14. I 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: *KEV. Samuel P. Homme*

CR2E037 (10/97)