

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

95 APR -5 PM 4:00

**DOCUMENT # N93000005081 (5)**

1. Corporation Name

**EGLISE EPHESE DE KENDALL, INC.**

Principal Place of Business

Mailing Address

15321 SW 112TH CT  
MIAMI FL 33157

15321 SW 112TH CT  
MIAMI FL 33157

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/02/1993

3a. Date of Last Report

04/26/1994

4. FEI Number

65-0451289

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		2a. Mailing Address	
21	14920 SW 67 <sup>th</sup> AV Suite, Apt. #, etc.	26	14920 SW 67 <sup>th</sup> AV Suite, Apt. #, etc.
22	City & State Miami FL	27	City & State Miami FL
24	Zip 33158	25	Country USA
28	Zip 33158	29	Country USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAMOUR, TAINÉ  
15321 SW 112TH CT  
MIAMI FL 33157

8510 SW 149 AV  
Miami FL 33193

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 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, typed or printed name of registered agent and the # applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAMOUR, TAINÉ	1.2 NAME	
STREET ADDRESS	15321 SW 112ND	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33157	1.4 CITY - ST - ZIP	
TITLE	DT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAMOUR, NADIA	2.2 NAME	
STREET ADDRESS	15321 SW 112ND	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33157	2.4 CITY - ST - ZIP	
TITLE	DS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALEXANDRE, ENIDE	3.2 NAME	
STREET ADDRESS	1515 NW 122ND ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33187	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		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)(b), 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 authorized 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 AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Date

(Daytime Phone #)

95-03-27

(301) 384-0102