2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State
04-06-2001 90065 034 ****61.25

DOCUMENT # N94000001555

1. Entity Name

EGLISE BAPTISTE DE LA RECONCILIATION, INC.

Principal Place of Business	Mailing Address
5443 N. STATE RD. 7 BOX 14 TAMARAC FL 33321	5443 N. STATE RD. 7 BOX 14 TAMARAC FL 33321

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0365296 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JEAN-LOUIS, FRANTZ REV 5290 S.W. 8TH STREET MARGATE FL 33068	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JEAN-LOUIS, FRANTZ REV. 5290 S.W. 8TH STREET MARGATE FL 33068	☐ Delete	DEACON ELIEZER ROMELUS 3108 BAYBERRY WAY MARGATE FL. 33063	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BELONY, ISAAC 1907 S.W. 81 TERRACE NORTH LAUDERDALE FL 33068	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CADET TOUSSAINT, MARIE 6300 S.W. 9TH PLACE NORTH LAUDERDALE FL 33068	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JEAN-LOUIS, MARIE 5290 S.W. 8TH STREET MARGATE FL 33068	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DARGINSON, LISETTE 5748 N.W. 31 AVE #102 FT. LAUDERDALE FL 33309	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST CAYARD, ULRICK 19704 HAMPTON DRIVE BOCA RATON FL 33434	☑ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED REV. FRANTZ JEAN-LOUIS 04-04-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #