## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # N9400001608

1. Corporation Name

## PREMIERE EGLISE BAPTISTE HAITIENNE DE BOCA RATON , INC.

Principal Place of Business 7451 LADSON TERRACE LAKE WORTH FL 33467

2. Principal Place of Business

21

Mailing Address

7451 LADSON TERRACE LAKE WORTH FL 33467

2a. Mailing Address

26

## FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90112 045 \*\*\*\*61.25



3. Date Incorporated or Qualifed

03/28/1994

Suite, Apt.	Apt. #, etc. Suite, Apt. #, etc.				, 4. FEI Number	App	lied For	
27					NOT APPLICABLE	Not Applicable		
City & Stat	City & State City & State				5. Certificate of Status Desired	\$8.75 A Fee Red		
23 ] Zip	Country	Zip	Country	,	6. Election Campaign Financing	\$5.00	May Be	
<del></del> '				,	Trust Fund Contribution	Added to	,	
24 25 29 30 30 9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
	o. Name and Address of Current	Registered Agent	81	Name	111111111111111111111111111111111111111	V		
	• • •							
BUSBY, ALBERTO F 708 S.W. 23RD AVE.				82 Street Address (P.O. Box Number is Not Acceptable)  83				
Part with the				City	FL	85 Zip C		
office or r agent. I a	registered agent, or both, in the State o im familiar with, and accept the obligati	f Florida. Such change was au	morized by	r tne corbo	corporation submits this statement for the purpose of ration's board of directors. I hereby accept the appoi	changing its i ntment as reg	registered jistered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Registered Age	nt signature re	quired when reinstating) DATE			
12.	OFFICERS AND		13.	Signatura 10	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE			Change	Addition	
	· -				•			
NAME	JOSEPH, REV. JEAN C			- 1				
STREET ADDRESS				3 STREET ADDRESS 4 CITY-ST-ZIP				
CITY-ST-ZIP	LAKE WORTH FL 33467			ST-ZIP	SD	Change	Addition	
TITLE	SD	12 DELETE	2.1 TITLE			-		
NAME	ST. LOUIS, MONIQUE		2.2 NAME	- 1	LESPERANCE, PAURICE SETH			
STREET ADORESS	10000 50 111 011,10 100 01			T ADDRESS	16322 Country Lake Cir	cle 😁	ا "المسا	
CITY-ST-ZIP	BOYNTON FL 33437			ST-ZIP	Delray Beach, Fl. 33484	K Change	☐ Addition	
TITLE	TD	<b>▼</b> DELETE	3.1 TITLE		GUERRIER, JEAN DIEUFAIT			
NAME	BENOIT, REV. ERICK		3.2 NAME	Į	GUERRIER, JEAN DIEUTAIT	u		
STREET ADDRESS	3063 DORSON WAY		3.3 STREE	ET ADDRESS	1154 SW 23rd Avenue			
CITY-ST-ZIP	DELRAY BEACH FL 33445		3.4, CITY-	ST-ZIP	Boynton Beach, Fl.3342			
TITLE	D	☐ DELETE	4.1 TITLE		WILLIAM, HUMBERT	🔀 Change	☐ Addition	
NAME .	NASHBI, BERNARD J		4. 2 NAME	:	720 NE 30th Court			
STREET ADDRESS			4.3 STREE	T ADDRESS	/AU NE JULII COUIC			
CITY-ST-ZIP	DELRAY BEACH FL 33445		4.4 CITY-	ST-ZIP	Pompano Beach, F133064			
TITLE	D DELIGIT BEACHTE GOTTO	€ <b>X</b> DELETE	5.1 TITLE		•	Change	☐ Addition	
NAME	PHILIPPES, ROSIAS J	1,7	5.2 NAME	ŀ	,			
STREET ADDRESS	1		5.3 STREE	T ADDRESS		•		
CITY-ST-ZIP	DELRAY BEACH FL 33445		5.4 CITY-	ST-ZIP			•	
TITLE		XXDELETE	6.1 TITLE		D	Change	Addition	
	1 T	2555	6.2 NAME		BENOIT, REV. ERICK	F. 1	j	
NAME .	GUERRIER, REV. JEAN D			ET ADDRÉSS	4967 NW 6th Court		l	
STREET ADDRESS	110101111111111111111111111111111111111							
CITY-ST-ZIP	BUYNIUN BEACH FL 33426		0.4 (31 )-1	V1-25F	<u>Delray Beach, F1, 33445</u> in Section 119.07(3)(i), Florida Statutes, I further cer	416 - 41 - 4 41 - 4 1-	.f. was atlan	

i hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 113.07(3)(i). Florida Statutes, I information supplied with this filing does not qualify for the exemption stated in Section 113.07(3)(ii). Florida Statutes, I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PROVIDED NAME OF SIGNING OFFICER OR DIRECTOR

03/30 / 1999 561-643-432,

CR2F037 (1