

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 MAY -1 PM 1:00

DOCUMENT # N94000005828 (8)

1. Corporation Name

PENIEL HAITIAN BAPTIST CHURCH OF LAKE WORTH, INC

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/29/1994
3a. Date of Last Report

4. FEI Number 65-0560064
Applied For Not Applicable

5. Certificate of Status Desired ☒ \$9.75 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

Mailing Address

1110 SOUTH 'A' STREET
LAKE WORTH FL 33460

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LAKE WORTH FL 33460

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ELAN, MIKLES
7680 GROVE ROAD
LANTANA FL 33462

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 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 title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D Mikles ELAN
NAME
STREET ADDRESS 7680 Grove Rd
CITY-STATE-ZIP Lantana FL 33462
TITLE D Plutha vertus - Luta Vertus
NAME
STREET ADDRESS 1001 South "D" Street
CITY-STATE-ZIP Lake Worth FL 33460
TITLE D Sata Sejour Yala S. Yala
NAME
STREET ADDRESS 244 S.W. 4th Ave
CITY-STATE-ZIP Doral FL 33126
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP
21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP
31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP
41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP
51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP
61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

REMITTED BY MAY

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)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mikles ELAN officer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-95-407-588-7803

Date (month/year)