

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90071 006 ****61.25

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1. Entity Name

NEW HOPE HAITIAN BAPTIST CHURCH, INC.



Principal Place of Business

**6319 NW 2 AVENUE
MIAMI FL 33127
US**

Mailing Address

**732 NW 186 DRIVE
MIAMI FL 33169
US**

2. Principal Place of Business

14120 N.W. 7AVE

3. Mailing Address

732 N.W. 186 Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

N. MIAMI, FL.

City & State

Miami, FL.

Zip

33168

Country

U.S.A

Zip

33169

Country

U.S.A

4. FEI Number **65-0622456**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CHERELUS, MARIE E
732 NW 186 DR
MIAMI FL 33169**

7. Name and Address of New Registered Agent

Name
Cherelus, Marie E.
Street Address (P.O. Box Number is Not Acceptable)
732 N.W. 186 Dr.

City
Miami

FL

Zip Code
33169

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Marie E. Cherelus**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-31-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **EXANTE, CHERELUS**
STREET ADDRESS **732 N W 196 DRIVE**
CITY-ST-ZIP **MIAMI FL 33169**

TITLE **VP/D** ☐ Delete
NAME **MARIE THERESE CHERELUS**
STREET ADDRESS **54 NW 103RD ST**
CITY-ST-ZIP **MIAMI SHORES FL 33150**

TITLE **SD** ☐ Delete
NAME **BYRON, ROSELINE**
STREET ADDRESS **1470 N W 138 STREET**
CITY-ST-ZIP **MIAMI FL 33167**

TITLE **TD** ☐ Delete
NAME **DECADE, JEANSE**
STREET ADDRESS **38 NW 68 TERR.**
CITY-ST-ZIP **MIAMI FL 33137**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **Marie E. Cherelus**

3-31-03 3056905909

CR2E037 (10/02)