FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500004188

1. Corporation Name

EGLISE BAPTISTE HAITIENNE DU SINAI, INC.

Principal Place of Business 14600 NW 7TH AVE MIAMI FL 33146 US Mailing Address

3061 NW 88 ST MIAMI FL 33147

US

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90063 019 ****61.25



	lace of Business	Za. Mailing Address	17058	Q 08/30/1995	adamed.		
21 14 6 Suite, Apt.		26 321 10 5 — Suite, Apt. #, etc.	77025	4.:FEI Number		App	lied For -
	· '	27	_	59-3370553		<u> </u>	Applicable
City & State		City & State	2.1			\$8.75 A	dditional
23 H, a	/ /		mi 300	5. Certificate of Status De	sired	Fee Rec	quired
Zip	Country	Zip	Country	6. Election Campaign Fin	ancing	\$5.00	May Be
24 33/	168 25 Dade	29 33162 3	o Dad	Trust Fund Contributio	n 🖰	Added to	Fees
,, 	9. Name and Address of Current R	egistered Agent		10. Name and Address of	f New Registere	d Agent	
	<u> </u>		81 Name	e de la companya de l			,
TOUSSAINT, MARC				Address (P O Box Number is Not	Acceptable)	· (: ' : - : - : :) - :	
3061 NW 88TH STREET						,	
MIAMI FL 33147							
			84 City	· · · · · · · · · · · · · · · · · · ·		85 Zip C	ode
			84 City				540
11. Pursuant	to the provisions of Sections 617.0502 ar	nd 617.1508, Florida Statutes	, the above-name	d corporation submits this statemen	for the purpose	of changing its r	egistered
office or t	registered agent, or both, in the State of Firm familiar with, and accept the obligation	lorida. Such change was auti	norized by the cor	poration's board of directors. I herel	by accept the app	ontment as reg	istered
	Maria	. **			4/8	199	
SIGNATURE	Signature, typed or printed havine of registered agent and	d title if applicable. (NOTE: R	egistered Agent signatur	e required when reinstating)	DATE		
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES	TO OFFICERS		
TITLE	D	☐ DELETE	1,1 TITLE		_	Change	Addition
NAME	TOUSSAINT, RUTH S		1.2 NAME	Toussaint, Ruth	S		
STREET ADDRESS	3061 NW 88TH STREET		1.3 STREET ADORES	\$ 321 N. 5. 1705. A			
CITY-ST-ZIP	MIAMI FL 33147		1.4 CITY-ST-ZIP	N. Miami Bear	.h. f. 1.	<u> 33162</u>	
TITLE	D	☐ DELETE	2.1 TITLE	-		Change	☐ Addition
NAME	CAZEAU, MARILYN T		2.2 NAME	•	•		
STREET ADDRESS	1128 NW 116TH TERRACE		2.3 STREET ADDRES	is	<u> </u>		÷ · ·
CITY-ST-ZIP	MIAMI FL 33168		2. 4 CITY-ST-ZIP				
TITLE	D	DELETE	3.1 TITLE			Change	Addition
NAME	CAZEAU, HOSNY		3.2 NAME	·			
STREET ADDRESS	1128 NW 116TH TERRACE		3.3 STREET ADDRES	ss			
CITY-ST-ZIP	MIAMI FL 33168		3.4. CITY-ST-ZIP				
TITLE	D	☐ DELETE	4.1 TITLE	<i>₽</i>		Change	Addition
NAME	TOUSSAINT, ANNA L		4. 2 NAME	Toussaint, Anne	L L	•	
STREET ADDRESS	3061 NW 88TH STREET		4.3 STREET ADDRES	S 321 M. 5. 17054			
CITY-ST-ZIP	MIAMI FL 33147	,	4.4 CITY-ST-ZIP	N. Miami Boar	h 3316.	2	
TITLE	D	☐ DELETE	5.1 TITLE		•	☐ Change	Addition
NAME	MYLA, GERTHA		5.2 NAME				
STREET ADDRESS	ANALARM AND TERRACE		5.3 STREET ADDRES	· ·	: .		
CITY-ST-ZIP	MIAMI FL 33056		5.4 CITY-ST-ZIP	·			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS	3		6.3 STREET ADDRES	ss			
CITY_ST_7IP			6.4 CITY-ST-ZIP	n 44		<u> </u>	
44 1 1 1	certify that the information supplied with t	his filing does not qualify for t	he exemption stat	ted in Section 119.07(3)(i), Florida S	tatutes. I further o	ertify that the in	formation

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 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

MOVE I GHILL BE SEQUIRED SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4/8/99

(305)652.894