

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # N95000005006		
1. Entity Name EL SHADDAI PRESBYTERIAN CHURCH, INC.		

Principal Place of Business 11303 NE 13TH AVENUE MIAMI, FL 33161	Mailing Address 13651 S BISCAYNE RIVER DR MIAMI, FL 33161
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04042008 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0619790	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ST. GERMAIN, JEAN DONY 13651 S. BISCAYNE RIVER DRIVE MIAMI, FL 33161

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ST GERMAN, JEAN D REV 13651 S BISCAYNE RIVER DR MIAMI, FL 33161
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOSEPH, JUGNACE 14060 BISCAYNE BLVD, APT 70S MIAMI, FL 33181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOUIS ERNEST, ST. GERMAIN 13651 S BISCAYNE RIVER DRIVE MIAMI, FL 33181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JEAN-BAPTISTE, FERNAND 1250 NW 125 ST MIAMI, FL 33187
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000505753
04/26/06-80128-014 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 817, 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: _____ **04/10/06 305-891-8966**

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #