

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90064 010 ****61.25

DOCUMENT # N95000005984

1. Entity Name

EGLISE BAPTISTE HAITIENNE BETHLEEM, INC.

Principal Place of Business

Mailing Address

**425 CRESCENT DR
 LAKE PARK FL 33403**

**425 CRESCENT DR
 LAKE PARK FL 33403**

2. Principal Place of Business

3. Mailing Address

Lake park
 Suite, Apt. #, etc.

425 Crescent Dr
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Lake park FL

Lake park FL

4. FEI Number

65-0637177

Applied For

Not Applicable.

Zip
33403

Country
Lake park

Zip
33403

Country
Lake park

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**EGLISE BAPTIST HAITENNE BETH.
 425 CRESCENT DRIVE
 LAKE PARK FL 33403**

Name
Eglise Baptiste H Bethleem
 Street Address (P.O. Box Number is Not Acceptable)

425 Crescent Dr
 City
Lake park FL Zip Code
33403

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE *4-28-02*

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** Delete
 NAME **BAPTISTE, NERZICHUS**
 STREET ADDRESS **645 - 36TH ST.**
 CITY-ST-ZIP **WEST PALM BEACH FL 33407**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **YDD** Delete
 NAME **FENELUS, MERILES**
 STREET ADDRESS **117 W. 37TH STREET**
 CITY-ST-ZIP **RIVIERA BEACH FL 33404**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **VOIYEL, JEAN LOUIS**
 STREET ADDRESS **5091 PORT PLACE**
 CITY-ST-ZIP **WEST PALM BEACH FL 33407**

TITLE Change Addition
 NAME *Imeles Seger*
 STREET ADDRESS *1410 WEDGEWOOD plaza Dr*
 CITY-ST-ZIP *Riviera Beach, FL, 33404*

TITLE **C** Delete
 NAME **GENESTAN, EOLRENE**
 STREET ADDRESS **5885 CAYMAN CIR E**
 CITY-ST-ZIP **W. PALM BCH. FL 33407**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** Delete
 NAME **TERALEM, DOMINIQUE**
 STREET ADDRESS **1500 CRESCENT CIR.**
 CITY-ST-ZIP **LAKE PARK FL 33403**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: *CHEVELON REISNER*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date *4-28-02* Phone # *(561) 845-2233*

CR2E037 (9/01)