

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000130

FILED
Mar 15, 2004
Secretary of State**Entity Name:** BETHESDA CHURCH MINISTRIES, INC.**Current Principal Place of Business:**14120 NW 7TH AVE
MIAMI, FL 33168**New Principal Place of Business:****Current Mailing Address:**POST OFFICE BOX 680373
MIAMI, FL 33168**New Mailing Address:****FEI Number:** 65-0709404**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BERROUET, DORISE M
240 EAST DRIVE
MIAMI, FL 33162 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: FRANCOIS, SEBASTIEN
Address: 1060 TORCHWOOD AVE
City-St-Zip: PLANTATION, FL 33324 US

Title: VP/D () Delete
Name: BIEN-AIME, MICHEL
Address: 16440 N.E. 10TH AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: S/D () Delete
Name: BERROUET, DORISE M
Address: 240 EAST DRIVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: T () Delete
Name: MILLS, YVES
Address: 117 N.W. 93RD STREET
City-St-Zip: MIAMI, FL 33150 US

Title: D () Delete
Name: SAINVIL, FRANTZ
Address: 14120 N.W. 7TH AVE
City-St-Zip: MIAMI, FL 33168 US

Title: C/D () Delete
Name: GASPARD, MAXON
Address: 14120 N.W. 7TH AVE
City-St-Zip: MIAMI, FL 33168 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DORISE M. BERROUET

S/D

03/15/2004

Electronic Signature of Signing Officer or Director

Date

JEAN D. BERROUET
240 EAST DRIVE
NORTH MIAMI BEACH, FL 33162