## 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N9600000130

The FILED Feb 11, 2005
Secretary of State

Entity Name: BETHESDA CHURCH MINISTRIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 14120 NW 7TH AVE MIAMI, FL 33168 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 680373 MIAMI, FL 33168 FEI Number: 65-0709404 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BERROUET, DORISE M 240 EAST DRIVE MIAMI, FL 33162 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete FRANCOIS, SEBASTIEN Name: Name: 10160 TORCHWOOD AVE Address: Address: City-St-Zip: PLANTATION, FL 33324 US City-St-Zip: Title: () Delete Title: () Change () Addition BIEN-AIME, MICHEL Name: Name: Address: 16440 N.E. 10TH AVE Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 US City-St-Zip: Title: S/D () Delete Title: () Change () Addition BERROUET, DORISE M Name: Name: Address: 240 EAST DRIVE Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 US City-St-Zip: Title: D ( ) Delete Title: () Change () Addition MILLS, YVES Name: Name: 9972 N.W. 2ND COURT Address: Address: City-St-Zip: PLANTATION, FL 33324 US City-St-Zip: Title: () Delete Title: () Change () Addition SAINVIL, FRANTZ Name: Name: 14120 N.W. 7TH AVE Address: Address: City-St-Zip: MIAMI, FL 33168 US City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition BERROUET, JEAN D GASPARD, MAXON Name: Name: Address: 240 EAST DRIVE Address: 17241 NW 9TH PLACE NORTH MIAMI BEACH, FL 33162 US MIAMI, FL 33168 US City-St-Zip: 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 02/11/2005