2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# N96000000235

Entity Name: EGLISE BAPTISTE HAITIENNE LES RACHETES, INC.

Current Principal Place of Business:

8390 N.W. 14TH AVENUE
MIAMI, FL 33147

New Principal Place of Business:

1122 NW 119 STREET
MIAMI, FL 33168

Current Mailing Address:

1460 N.W. 92 STREET
MIAMI, FL 33167

New Mailing Address:

FEI Number: 65-0594453 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CIVIIL, VENEL
1460 N.W. 92ND STREET
MIAMI, FL 33147 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: PD ( ) Delete
Name: CIVIL, VENEL REV
Address: 1460 N.W. 92ND STREET
City-St-Zip: MIAMI, FL 33147

Title: VD ( ) Delete
Name: ANGLADE, CLICENIE
Address: 1460 N.W. 92ND STREET
City-St-Zip: MIAMI, FL 33147

Title: SD ( ) Delete
Name: BRUTUS, DELIVRANCE
Address: 13200 N.W. 22ND AVENUE
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete
Name: PAUL, AUREL
Address: 3362 N.W. 194TH STREET
City-St-Zip: MIAMI, FL

Title: SDA (X) Delete
Name: BELJOUS, LYONEL
Address: 435 NE 109 ST
City-St-Zip: MIAMI, FL 33147

Title: TDA (X) Delete
Name: MADELEINE, CIVIL
Address: 1310 NW 101 ST
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition
Name: DORCE, ALCINE
Address: 12135 N.E. 5TH AVENUE
City-St-Zip: MIAMI, FL 33162

Title: TD (X) Change ( ) Addition
Name: GEORGES, FRANCOIS
Address: 2230 N.W. 33RD STREET
City-St-Zip: MIAMI, FL 33127

Title: ( ) Change ( ) Addition
Name:
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 Chapter 119, 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: CIVIL VENEL PD 04/24/2006

Electronic Signature of Signing Officer or Director — Date