

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90392 039 ****70.00

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1. Entity Name

EGLISE BAPTISTE DE SION, INC.



Principal Place of Business

1631 NW 2 AVE
FT LAUDERDALE FL 33311

Mailing Address

1631 NW 2 AVE
FT LAUDERDALE FL 33311

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0693375

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NOLASQUE, CLEDOR PASTOR
1631 NW 2 AVE
FORT LAUDERDALE FL 33311

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Nolasque Cledor, Pastor

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-15-04

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME CLEDOR, NOLASQUE
STREET ADDRESS 1631 NW 2 AVE
CITY-ST-ZIP FT LAUDERDALE FL 33311

TITLE D ☐ Delete
NAME CLEDOR, ILIANNA
STREET ADDRESS 1631 NW 2 AVE
CITY-ST-ZIP FT LAUDERDALE FL 33311

TITLE D ☐ Delete
NAME JEANNOT, ROSE
STREET ADDRESS 1123 NE 6 AVE, #6
CITY-ST-ZIP FT LAUDERDALE FL

TITLE D ☒ Delete
NAME [REDACTED]
STREET ADDRESS [REDACTED]
CITY-ST-ZIP [REDACTED]

TITLE D ☐ Delete
NAME MICHELLE, GEORGE
STREET ADDRESS 0080 NW 22 ST
CITY-ST-ZIP SUNRISE FL 33313

TITLE D ☒ Delete
NAME [REDACTED]
STREET ADDRESS [REDACTED]
CITY-ST-ZIP FORT LAUDERDALE FL 33311

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE *Louis JEUNE SERGO* ☐ Change ☒ Addition
NAME
STREET ADDRESS *2820 Somerset DR #308*
CITY-ST-ZIP *Ft. Lauderdale FL 33311*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Nolasque Cledor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/04

Date

(954) 768-0427

Daytime Phone #