

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 28, 2008 08:00 A
Secretary of State

DOCUMENT # N96000000916	
1. Entity Name EGLISE EVANGELIQUE DE SION, INC.	

Principal Place of Business 403 SW 75 WAY NORTH LAUDERDALE FL 33068	Mailing Address 403 SW 75 WAY NORTH LAUDERDALE FL 33068
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE	CR2E037 (10/07)
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	
CLEDOR, NOLASQUE PASTOR 403 SW 75 WAY NORTH LAUDERDALE FL 33068	

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 <i>Nolasque Cledor</i>	DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
D CLEDOR, NOLASQUE 1631 NW 2 AVE FT LAUDERDALE FL 33311	
D CLEDOR, ILIANNA 1631 NW 2 AVE FT LAUDERDALE FL 33311	
D JEANNOT, ROSE 1123 NE 6 AVE., #6 FT LAUDERDALE FL	
D SERGO, LOUIS J 2820 SOMERSET DR #308 FORT LAUDERDALE FL 33311	
D MICHELLE, GEORGE 0080 NW 22 ST SUNRISE FL 33313	
☐ Delete	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
U000000873640 04/10/08-80086-015 70.00	
☐ Change ☐ Addition	
☐ Change ☐ Addition	
☐ Change ☐ Addition	
☐ Change ☐ Addition	
☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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* 03/25/08 (95)244-3695