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Mar 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000001989 (0)**

1. Corporation Name

EGLISE EVANGELIQUE DES RACHETES, INC.

Principal Place of Business

Mailing Address

**422 NW 54TH STREET
MIAMI FL 33127**

**1017 NW 114TH STREET
MIAMI FL 33168
US**

2. Principal Place of Business

2a. Mailing Address

21 422 N.W. 54TH STREET

26 1017 N.W. 114TH STREET

22 MIAMI FL 33127

27 MIAMI FL 33168

City & State

City & State

23 33127

25 Dade

28 33168

30 Dade

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/09/1996

4. FEI Number

65-0734425

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

10. Name and Address of New Registered Agent

**LOUIS, JOANIS REV.
1017 NW 114TH STREET
MIAMI FL 33168**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **LOUIS, JOANIS R**
STREET ADDRESS **1017 NW 114TH ST**
CITY-ST-ZIP **MIAMI FL**

TITLE **AD** ☐ DELETE

NAME **LOUIS, JEAN M**
STREET ADDRESS **1070 NW 112TH TER**
CITY-ST-ZIP **MIAMI FL**

TITLE **TD** ☐ DELETE

NAME **FRANCOIS, YVANN**
STREET ADDRESS **157 NW 69TH ST**
CITY-ST-ZIP **MIAMI FL**

TITLE **SD** ☐ DELETE

NAME **DIENVIL, MARIE J**
STREET ADDRESS **1070 NE 136TH ST**
CITY-ST-ZIP **MIAMI FL**

TITLE **M** ☐ DELETE

NAME **DUVERSANT, JOSEPH**
STREET ADDRESS **422 NW 54TH ST**
CITY-ST-ZIP **MIAMI FL**

TITLE **M** ☐ DELETE

NAME **SEVERE, MICHEL**
STREET ADDRESS **471 NE 83 ST.**
CITY-ST-ZIP **MIAMI FL 33138**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Joanis Louis

3-10-98

CR2E037 (10/97)