

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90977 037 ****61.25

DOCUMENT # N96000005015

1. Entity Name

MAHALALEEL BAPTIST CHURCH, INC.



Principal Place of Business

**2874 N. STATE ROAD 7
LAUDERDALE LAKES FL 33311**

Mailing Address

**5859 N.W. 16 STREET
SUNRISE FL 33313**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3410259**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TILERIN, CERAMAND
5859 N.W. 16TH STREET
SUNRISE FL 33313**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 **PD** ☐ Delete
NAME **MIREUS, OLUS**
STREET ADDRESS **260 S.W. 56TH TERRACE #106**
CITY-ST-ZIP **MARGATE FL 33068**

TITLE **TD** ☐ Delete
NAME **TILERIN, CERAMAND**
STREET ADDRESS **5859 N.W. 16 ST.**
CITY-ST-ZIP **SUNRISE FL 33313**

TITLE **SD** ☐ Delete
NAME **LOSEIL, JOSEPH B**
STREET ADDRESS **1122 S.W. 1ST STREET**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **M** ☐ Delete
NAME **DUPICHE, ADORABLE**
STREET ADDRESS **100 N.W. 188 ST**
CITY-ST-ZIP **N. MIAMI FL 33316-9**

TITLE **VP** ☐ Delete
NAME **SYLVAIN, GEDEON**
STREET ADDRESS **5301 N.W. 16TH CT.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33313**

TITLE **MC** ☐ Delete
NAME **REMY, ENVERDIEU**
STREET ADDRESS **821 SW 63RD WAY**
CITY-ST-ZIP **N. LAUDERDALE FL 33068**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ceramand Tilerin 2/13/03

CR2E037 (10/02)