

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000006115

FILED
Feb 28, 2009
Secretary of State

Entity Name: CORNERSTONE HAITIAN BAPTIST CHURCH, INC.

Current Principal Place of Business:

830 NW 73RD STREET
MIAMI, FL 33150 US

New Principal Place of Business:

Current Mailing Address:

19810 NE 10TH CT
MIAMI, FL 33179 US

New Mailing Address:

FEI Number: 65-0740762 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ESNEL, FLEURJUSTE
19810 NE 10TH CT
MIAMI, FL 33179 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: ESNEL FLEURJUSTE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: PIERRE, ARICOLE
Address: 875 NE 146 STREET
City-St-Zip: MIAMI, FL 33161 US

Title: D () Delete
Name: ESNEL, FLEURJUSTE
Address: 19810 NE 10TH CT
City-St-Zip: MIAMI, FL 33179 US

Title: S () Delete
Name: MYLA, GERTHA
Address: 1940 NW 188 TERRACE
City-St-Zip: MIAMI, FL 33056 US

Title: C () Delete
Name: MARTIN, GUY
Address: 1635 NW 131 STREET
City-St-Zip: MIAMI, FL 33127 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: ESNEL FLEURJUSTE

D

02/28/2009

Electronic Signature of Signing Officer or Director

Date