## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham-

Secretary of State DIVISION OF CORPORATIONS

N96000006300 (5) DOCUMENT #

## CHRISTIAN BAPTISTE CHURCH OF CANAAN, INC.



97 JUN 24 PM 2: 12

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business		Mailing Address				
274 NE 59 STREET		274 NE 59 STREET				
MIAMI FL 33136		MIAMI FL 33137-2112				
					3. Date Incorporated or Qualified 12/11/1996	3a. Date of Last Report がかれ E
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		65-074320	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23	Country	<b>Zip</b>	Country		Trust Fund Contribution	Added to Fees
Zip				•	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No	
24	25 25 Name and Address of Curre		[30]		10. Name and Address of New Re	
	U. Maria and Arabica and Arabi		81	Name		
THOMAS	S, REPHA					
	E 7 AVE.		82 Street Add		ddress (P.O. Box Number is Not Acceptable)	
MIAMI F			83			
THE WELL I	L 00101					
			84	City		FL 85 Zip Code
11. Pursuant t	o the provisions of Sections 617.05	02 and 617.1508, Florida Sta	itutes, the abov	e-named cor	poration submits this statement for the p	urnose of changing its registered
office or re	egistered agent, or both, in the Stat m tamiliar with, and accept the obli	le of Florida. Such change we	is authorized b	/ the corpora	ition's board of directors. I hereby accept	of the appointment as registered
	Trigiting with and accept the con-	gations of, bection of 7.0000,	TIONOL OLLIGIC	<b>J</b> .		
SIGNATURE _	Signature, typed or printed name of registered as	gent and title if applicable. (f	NOTE: Registered Ag	ent signature requ	lifed when reinstating)	DATE
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	P	☐ DELETE	1.1 TITLE	7.	ADRIEN BERGET 141 N.E.142 85. MIAMI, PLA	Change Addition
NAMÈ	JOSEPH, DESENTANT		1.2 NAME	f	ADRIEN ISENDED	112 1/
STREET ADDRESS	274 NE 59 STREET		1.3 STREE	ADDRESS	ANI N.E.IN2 84.	2011
CITY-ST-ZIP	MIAMI FL 33138		1.4 CiTY-	ST-ZIP	MIAMI, PLB	33161
TITLE	V	☐ DELETE	2.1 TITLE	7.	MAURICE SUFFE	Addition
NAME	CHARLES, ESPERT L		2.2 NAME	1	THURICE SUFFE	6
STREET ADDRESS	274 NE 59 STREET		2.3 STREE	ADDRESS	2315 N.W. 8486	f; 33147
CITY-ST-ZIP	MIAMI PL 33138	· · · · · · · · · · · · · · · · · · ·	2 4 CITY-	ST-ZIP	MIAM! FLO	
TITLE	Ţ	☐ DELETE	3.1 TITLE		LRICK SALVAdo	R. ☐ Change ☑ Addition
NAME	JOSEPH, OSLER		3.2 NAME	H	THE SHOP	
STREET ADDRESS	274 NE 59 STREET			ADDRESS	75 N.W 758+.	2/57
CITY-ST-ZIP	MIAMI FL 33138	T or ere	3.4 CITY-	ST-ZIP	MIAMILFLD 3	
TITLE	8 100500 144005 0	DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	JOSEPH, MARIE C		4. 2 NAME		800002	227400 <u> </u>
STREET ADDRESS	274 NE 59 STREET			ADDRESS	-07/01	22745181 797-01037-015 56.25   Marge * 60 Addion
CIY-ST-ZIP	MIAMI FL 33138	Driete	4.4 C(1)Y-1	ST-ZIP	*****	6.25
TIME		☐ DELETE	5.1 TITLE			La change - Tarpadonos
NAME			5.2 NAME		Λ ,	
STREET ADDRESS				ADDRESS	14.(11/11)	
CITY-ST-ZIP		I DECES	5.4 CITY-1	ST-ZIP	W.mar	/ Change Addition
TITLE		DELETE	6.1 TITLE		<u>U-alan</u> 1924	Change Addition
NAME I			6.2 NAME		6124	197
STREET ADDRESS				F ADDRESS	~/ /,	1 ' '
CITY-ST-ZIP			6.4 CITY-	ST - ZIP	•	•

14. I do 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 eath; 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 3 if changed, or on an attackment with an address.