

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 23, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N98000006733**

1. Entity Name

**TABERNACLE JERUSALEM CHURCH CORPORATION**



Principal Place of Business

**561 NW 194 STREET  
MIAMI FL 33169**

Mailing Address

**561 NW 194 STREET  
MIAMI FL 33169**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0886864**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PHILIPPE, JEAN REV.  
561 NW 194 STREET  
MIAMI FL 33169**

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  
Due By May 1, 2006**

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  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**PD  
PHILIPPE, JEAN REV.  
561 NW 194 STREET  
MIAMI FL 33169**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**VPD  
BERWITH, JEAN-PHILIPPE  
361 NW 194 ST  
MIAMI FL**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**SD  
BERNITH, JEAN-PHILIPPE  
561 NW 194 ST  
MIAMI FL**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**SD  
BONHOMME, FRANCIOS  
7820 GRANADA BLVD  
MIRAMAR FL 33023**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**1000000443609  
03/06/06-80017-002 66.25**

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ 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.