

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 02, 2009
Secretary of State**

DOCUMENT# N99000001384

Entity Name: EGLISE DU NOUVEAU TESTAMENT, INC.

Current Principal Place of Business:

281 N W 79 ST
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

1110 N.W. 126TH ST
NORTH MIAMI, FL 33168

New Mailing Address:

FEI Number: 65-1055205 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

DAUX, SIMON
1110 N.W. 126TH ST
NORTH MIAMI, FL 33168 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAUX, SIMON
Address: 1110 N.W. 126TH ST
City-St-Zip: NORTH MIAMI, FL 33168

Title: VPD () Delete
Name: DAUX, CARMEN
Address: 1110 N.W. 126TH ST
City-St-Zip: NORTH MIAMI, FL 33168

Title: STD () Delete
Name: JOSEPH, OSTHENE
Address: 12155 N.E. MIAMI CT
City-St-Zip: NORTH MIAMI, FL 33163

Title: PD () Delete
Name: MANECE, FARLUS
Address: 14691 NW 16 DRIVE
City-St-Zip: MIAMI, FL 33167

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: MANECEFARELUS

PD

05/02/2009

Electronic Signature of Signing Officer or Director

Date