

2000 UNIFORM BUSINESS REPORT (UBR)

6/20/00-90011-026-\$61.25-\$61.25

DOCUMENT # N99000003651

1. Entity Name

GRACE HAITIAN CHURCH INC.

Principal Place of Business

715 S. FEDERAL HWY., NO 723
BOYNTON BEACH FL 33435

Mailing Address

715 S. FEDERAL HWY., NO 723
BOYNTON BEACH FL 33435

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT 11 PM 6:38

2. Principal Place of Business

715 S. Federal Hwy
Suite, Apt. #, etc.
#723

3. Mailing Address

Same
Suite, Apt. #, etc.
Same



DO NOT WRITE IN THIS SPACE

City & State

Boynton Beach FL
Zip 33435 Country FLA.

City & State

Same
Zip Same Country Same

4. FEI Number

65-0778093

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BELONY, ANDRE PASTOR
715 S. FEDERAL HWY., NO 723
BOYNTON BEACH FL 33435

Name

Pastor Andre Belony

Street

715 S. Federal Highway, #723

City

Boynton Beach FL Zip Code 33435

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature)

When reinstating)

DATE

FILE NOW-FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

00 May Be
ed to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	Manita Belony	1460 N.W. 1ST COURT	Boynton Bch, FL 33435	☒
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	Majorie Bequzier	809 S.E. 2nd Ave	Delray Beach, FL 33444	☒
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	Dorcilia Joseph	6286 Pines Road DR. #114	Lake Worth, FL 33463	☒
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	Enock Jean Belony	1460 N.W. 1ST COURT	Boynton Beach, FL 33435	☒
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
				☐
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
				☐

11.

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

CONDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change	☐ Addition
Treasurer	
☐ Change	☐ Addition
Secretary	
☐ Change	☐ Addition
Women Group	
☐ Change	☐ Addition
Sound System Music	
☐ Change	☐ Addition
none	
☐ Change	☐ Addition
none	
AD	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in 3.07(3)(i), Florida Statutes. I further certify that the information has the 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 61, 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

Andre Belony Pastor 561-737-4894
Date 8-1-2000 Daytime Phone #