

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State

0053332

DOCUMENT # N99000004834

1. Entity Name

EGLISE DE DIEU PRIMITIVE DE LA NOUVELLE JERUSALE

04-03-2001 90056 040 ****75.00

Principal Place of Business

Mailing Address

**308 NW 1ST AVENUE
 DELRAY BEACH FL 33444**

**308 NW 1ST AVENUE
 DELRAY BEACH FL 33444**

2. Principal Place of Business

SAME AS ABOVE

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

65-0912512

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DERILUS, OSIAS
 3555 HARLOWE AVE.
 BOYNTON BCH FL 33436**

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.

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**

9. Election Campaign Financing
 Trust Fund Contribution.

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** Delete
 NAME **DIEUJUSTE, HARRY**
 STREET ADDRESS **308 NW 1ST AVE.**
 CITY-ST-ZIP **DELRAY BCH FL 33444**

TITLE Change Addition
 NAME **SONTHONAX EMILCAR**
 STREET ADDRESS **617 SW 4TH AVENUE**
 CITY-ST-ZIP **BOYNTON BEACH, FL 33426**

TITLE **SD** Delete
 NAME **DIEUJUSTE, MARIE C**
 STREET ADDRESS **308 NW 1ST AVE.**
 CITY-ST-ZIP **DELRAY BCH FL 33444**

TITLE Change Addition
 NAME **DS**
 STREET ADDRESS **DIEUJUSTE, HARRY**
 CITY-ST-ZIP **308-NW-1ST AVENUE**
DELRAY BEACH, FL 33444

TITLE **D** Delete
 NAME **EMILCAR, SONTHONAX**
 STREET ADDRESS **713 SE 3RD AVE.**
 CITY-ST-ZIP **DELRAY BCH FL 33444**

TITLE Change Addition
 NAME **D**
 STREET ADDRESS **LUBERISSE, RUBENS M**
 CITY-ST-ZIP **711 SW 12TH COURT**
DEERFIELD BEACH, FL 33441

TITLE **TD** Delete
 NAME **MERCI, MIRADIEU**
 STREET ADDRESS **3400 N. DIXIE HWY.**
 CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE Change Addition
 NAME **TD**
 STREET ADDRESS **MERCI, MIRADIEU**
 CITY-ST-ZIP **3400 N. DIXIE HWY**
BOCA RATON, FL 33487
same

TITLE **D** Delete
 NAME **LUBERISSE, RUBENS M**
 STREET ADDRESS **711 SW 12TH CT.**
 CITY-ST-ZIP **DEERFIELD BCH FL 33441**

TITLE Change Addition
 NAME **SD**
 STREET ADDRESS **DIEUJUSTE, MARIE C**
 CITY-ST-ZIP **308 NW 1ST AVENUE**
DELRAY BEACH, FL 33444

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I 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 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.

SIGNATURE: **SIGNATURE OF RUBENS M LUBERISSE**

Date **03/28/01** Daytime Phone # **381 7331430**

CR2E037 (10/00)