

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 12, 2004 8:00 am**  
**Secretary of State**

05-12-2004 90208 048 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                       |                                                                                                   |                                                                                                                                             |                                                                       |                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # N99000005920</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                       |                                                                                                   |                                                                                                                                             |                                                                       |                                                                              |
| <b>1. Entity Name</b><br>CONFERENCE OF HAITIAN PASTORS UNITED IN CHRIST, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                       |                                                                                                   |                                                                                                                                             |                                                                       |                                                                              |
| <b>Principal Place of Business</b><br>360 N.E. 151 ST.<br>MIAMI, FL 33162                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                       |                                                                                                   | <b>Mailing Address</b><br>360 N.E. 151 ST.<br>MIAMI, FL 33162                                                                               |                                                                       |                                                                              |
| <b>2. Principal Place of Business</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                       | <b>3. Mailing Address</b><br>P.O. Box 680027                                                      |                                                                                                                                             |                                                                       |                                                                              |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                       | Suite, Apt. #, etc.<br>Miami, FL                                                                  |                                                                                                                                             |                                                                       |                                                                              |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                       | City & State                                                                                      |                                                                                                                                             |                                                                       |                                                                              |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Country                                                               | Zip                                                                                               | Country                                                                                                                                     | 04302004 Chg-NP CR2E037 (10/03)                                       |                                                                              |
| 33168                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                       | USA                                                                                               |                                                                                                                                             | <b>4. FEI Number</b><br>65-0953696                                    |                                                                              |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                       |                                                                                                   |                                                                                                                                             | Applied For<br>Not Applicable                                         |                                                                              |
| <b>6. Name and Address of Current Registered Agent</b><br><br>VIEUX, HAROLD A REV<br>360 NE 151 ST.<br>MIAMI, FL 33162                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                       |                                                                                                   | <b>7. Name and Address of New Registered Agent</b><br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL Zip Code |                                                                       |                                                                              |
| <b>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.</b>                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                       |                                                                                                   |                                                                                                                                             |                                                                       |                                                                              |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                       |                                                                                                   |                                                                                                                                             |                                                                       |                                                                              |
| <b>Filing Fee is \$61.25 Due by May 1, 2004</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                       | <b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                                                                                             | <b>Make check payable to Florida Department of State</b>              |                                                                              |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                       |                                                                                                   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                                |                                                                       |                                                                              |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | PED<br>VIEUX, HAROLD A REV<br>1102 SW 182ND<br>MIAMI, FL 33167        | <input type="checkbox"/> Delete                                                                   | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | 360 NE 151 ST<br>Miami, FL 33162                                      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | TV<br>SAINTUS, STEVE REV<br>995 NE 124 ST STE 200<br>MIAMI, FL 33161  | <input checked="" type="checkbox"/> Delete                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | TV<br>WILFRID SAINT-JEAN REV<br>8451 NW 5 AVE<br>MIAMI, FL 33150      | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | TC<br>MAXY, WILMER REV<br>7321 NE 2ND AVE<br>MIAMI, FL 33138          | <input checked="" type="checkbox"/> Delete                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | TC<br>JEAN, AMOS REV.<br>1000 NW 111 ST, Miami, FL 33168              | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | TAC<br>JEAN, AMOS REV<br>1000 NW 111 ST<br>MIAMI, FL 33168            | <input checked="" type="checkbox"/> Delete                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | TAC<br>SAINTVIL, PROSPERE REV.<br>7424-26 NE 2ND AVE, Miami, FL 33138 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | TTR<br>MOISE, JACQUES J<br>7321 NE 2ND AVE<br>MIAMI, FL 33138         | <input checked="" type="checkbox"/> Delete                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | TTR<br>JEAN-PHILIPPE, FRITZ<br>740 NW 125 ST, Miami, FL 33168         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | S<br>NOREY, HENRI REV<br>2950 NW 45 AVE<br>LAUDERDALE LAKES, FL 33313 | <input checked="" type="checkbox"/> Delete                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | S<br>MONDESIR, MYRTON M. REV.<br>41 NE 173 STREET, NMB, FL 33162      | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>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.</b> |                                                                       |                                                                                                   |                                                                                                                                             |                                                                       |                                                                              |
| <b>SIGNATURE:</b> _____ <b>HAROLD A. VIEUX</b> 5/6/04 (35)949 2474                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                       |                                                                                                   |                                                                                                                                             |                                                                       |                                                                              |



*Attachment*  
*240X1902*

**Division of Corporations**

**2004 Annual Report**

Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the annual report form.

|                                                   |                                                      |
|---------------------------------------------------|------------------------------------------------------|
| This information cannot be changed on the report. |                                                      |
| Document Number                                   | N99000005920                                         |
| Business Entity Name                              | CONFERENCE OF HAITIAN PASTORS UNITED IN CHRIST, INC. |
| Original File Date                                | 10/05/1999                                           |

*AFTER MANY ATTEMPTS,  
WE WERE UNABLE TO  
MAKE THE NECESSARY  
CHANGES VIA THE INTERNET.*

FEI Number 65-0953696

Principal Address 360 N.E. 151 ST.  
MIAMI, FL 33162

Mailing Address 360 N.E. 151 ST.  
MIAMI, FL 33162

*P.O. Box 680027  
MIAMI, FL 33168*

Registered Agent REV HAROLD A VIEUX  
360 NE 151 ST.  
MIAMI, FL 33162

*PLEASE ADJUST YOUR RECORDS  
ACCORDINGLY.*

**Officer/Director Name And Address**

1) PED  
REV HAROLD A VIEUX  
1102 SW 162ND  
MIAMI, FL 33157

~~TV  
REV STEVE SAINTUS  
995 NE 124 ST STE 200  
MIAMI, FL 33161~~

~~TC  
REV WILMER MAXY  
7321 NE 2ND AVE  
MIAMI, FL 33138~~

~~TAC  
REV AMOS JEAN  
1000 NW 111 ST  
MIAMI, FL 33168~~

*360 N.E. 151 ST.  
MIAMI, FL 33162*

2) TV  
REV. WILFRID SAINT JEAN  
8451 N.W. 5 AVENUE  
MIAMI, FL 33150

REV. AMOS JEAN  
1000 N.W. 111 ST.  
MIAMI, FL 33168

4) TAC  
REV. PROSPERE ST VIL  
7424-26 NE. 2ND AVE.  
MIAMI, FL 33138

*Collection*  
24064902  
TTR  
5)  
~~TTR~~  
~~JACQUES J MOISE~~  
~~7321 NE 2ND AVE~~  
~~MIAMI, FL 33138~~

N99080005990  
TTR  
REV. FRITZ JEAN-PHILIPPE  
740 NW 125 ST.  
MIAMI, FL 33168

6) → AS  
REV HENRI NOREY  
2950 NW 45 AVE  
LAUDERDALE LAKES, FL 33313

If all of the above information is correct  
and you do not wish to make any  
changes, please select:

☐ No Changes

If you need to make changes to  
the above information, please  
select:

☐ Make Changes

**Sunbiz Home Page**

**Public Access Help**

7) → S  
REV. MYRTHO M. MONDESIR  
41 N.E. 173 STREET  
NORTH MIAMI BEACH, FL 33162