2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006383

FILED Aug 23, 2005 Secretary of State

Entity Name: SOUTH DADE HAITIAN UNITED METHODIST MISSION, INC.

Current F	Principal Place of Business:	New Principal Place of Business:
605 SW 6 HOMEST	STH AVE EAD, FL 33030	
Current N	Mailing Address:	New Mailing Address:
PO BOX 9 HOMEST	900774 'EAD, FL 33090	
	r: 65-1021496 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation	
Name and	d Address of Current Registered Age	nt: Name and Address of New Registered Agent:
35 N.W. 1	, STEVEN D 16TH STREET EAD, FL 33030 US	
		the purpose of changing its registered office or registered agent, or both,
n the Stat	te of Florida.	the purpose of changing its registered office or registered agent, or both,
n the Stat	te of Florida.	
n the Stat SIGNATU	te of Florida. ´ JRE:	
n the Stat BIGNATU DFFICER Title: Name: Address:	te of Florida. JRE: Electronic Signature of Registere RS AND DIRECTORS: TT () Delete MARCEUS, EMMANUEL 605 S.W. 6TH AVENUE	d Agent Date
n the Stat SIGNATU	te of Florida. JRE: Electronic Signature of Registere RS AND DIRECTORS: TT () Delete MARCEUS, EMMANUEL 605 S.W. 6TH AVENUE HOMESTEAD, FL 33030 TC () Delete FLEURINE, ELOU 605 S.W. 6TH AVENUE	d Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address:
n the Stat BIGNATU DFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	te of Florida. JRE: Electronic Signature of Registere RS AND DIRECTORS: TT () Delete MARCEUS, EMMANUEL 605 S.W. 6TH AVENUE HOMESTEAD, FL 33030 TC () Delete FLEURINE, ELOU 605 S.W. 6TH AVENUE HOMESTEAD, FL 33030 TS () Delete DORSAINVIL, ERNSO 605 S.W. 6TH AVENUE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MONTREUIL FILS MILORD REV 08/23/2005