2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006872

FILED Jan 22, 2008 Secretary of State

Entity Name: EGLISE EVANGELIQUE BAPTISTE DE NAZARETH, INC.

| Current F | Principal Place of Business: | New Principal Place | of Business: |
|---|--|---|---|
| 1551 NW FORT LA | 47 AVE UDERDALE, FL 33313 | | |
| Current I | Mailing Address: | New Mailing Addres | ss: |
| 1551 NW FORT LA | 47 AVE UDERDALE, FL 33313 | | |
| FEI Numbe | r: 65-0961612 FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name an | d Address of Current Registered Agent: | Name and Address | of New Registered Agent: |
| 6270 NW SUNRISE | E, FL 33313 US | | ad affice or registered agent or both |
| | e named entity submits this statement for th | ie purpose of changing its registere | ed office of registered agent, of both, |
| | e named entity submits this statement for tr te of Florida. | ne purpose of changing its registere | ed office of registered agent, of both, |
| | te of Florida. | | ed office of registered agent, of both, |
| in the Sta | te of Florida. | | Date |
| in the Sta | te of Florida. | Agent | Date |
| in the Sta | te of Florida. JRE: Electronic Signature of Registered A RS AND DIRECTORS: TD () Delete JEAN FRANCOIS, THOMAS 1101 TENNESSEE AVENUE | Agent | |
| in the Star SIGNATL OFFICER Title: Name: Address: | te of Florida. JRE: Electronic Signature of Registered A RS AND DIRECTORS: TD () Delete JEAN FRANCOIS, THOMAS 1101 TENNESSEE AVENUE FORT LAUDERDALE, FL 33312 TD () Delete JEAN PIERRE, MICHEL 301 NE 43 STREET | Agent ADDITIONS/CHANG Title: Name: Address: | Date ES TO OFFICERS AND DIRECTOR |
| in the State SIGNATL OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: | te of Florida. JRE: Electronic Signature of Registered A RS AND DIRECTORS: TD () Delete JEAN FRANCOIS, THOMAS 1101 TENNESSEE AVENUE FORT LAUDERDALE, FL 33312 TD () Delete JEAN PIERRE, MICHEL 301 NE 43 STREET OAKLAND PARK, FL 33304 TD () Delete DESRAVINES, WILLIAM 1172 TENNESSEE AVE | Agent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: | Date ES TO OFFICERS AND DIRECTOR: () Change () Addition |

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: WILLIAM DESRAVINES TD 01/22/2008