

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000114875

FILED
Apr 28, 2011
Secretary of State

Entity Name: ELOHIM BARA/RAPHA HOME AND HOSPITAL FOR THE AGED CORP

Current Principal Place of Business:

1175 NW 132 ST
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

1175 NW 132 ST
MIAMI, FL 33168

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

VIRGELIN, LUCIEN J
1175 NW 132 ST
MIAMI, FL 33168 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: JEAN, DJENANE RN
Address: 14560 NE 6TH AVE APT. 314
City-St-Zip: NORTH MIAMI, FL 33161

Title: VP
Name: VIRGELIN, J. LUCIEN
Address: 1175 NW 132 ST
City-St-Zip: MIAMI, FL 33168

Title: VP
Name: JEAN, J. EDZER CPA
Address: 14560 NE 6TH AVE APT. 314
City-St-Zip: NORTH MIAMI, FL 33161

Title: VP
Name: VIRGELIN, C. BENOIT MD
Address: 11223 NE 8TH AVE APT. 103
City-St-Zip: SEATTLE, WA 98125

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUCIEN J VIRGELIN

VP

04/28/2011

Electronic Signature of Signing Officer or Director

Date