## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 702758** 

Entity Name: ST. JOHN LUTHERAN CHURCH OF MIAMI SHORES, FLORIDA,

INC.

FILED Feb 08, 2021 Secretary of State 3546183413CC

## **Current Principal Place of Business:**

10390 NE 2ND AVE MIAMI SHORES, FL 33138

## **Current Mailing Address:**

10390 NE 2ND AVE

MIAMI SHORES, FL 33138 US

FEI Number: 59-6522047 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MARC-CHARLES, JEAN-PIERRE F REV. 10390 NE 2ND AVENUE MIAMI SHORES, FL 33138 US

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

Officer/Director Detail:

Title PRESIDENT Title D

 Name
 CAMILLE, BORIS
 Name
 AZOR, JUANO

 Address
 84 NE 150 STREET
 Address
 810 NW 96 STREET

 City-State-Zip:
 MIAMI FL 33161
 City-State-Zip: MIAMI FL 33142

Title REV. Title D

NameMARC-CHARLES, JEAN-PIERRE FNameVISCARRA, JENIFFERAddress10390 NE 2ND AVENUEAddress16909 N BAY ROAD

City-State-Zip: MIAMI SHORES FL 33138 #115

City-State-Zip: SUNNY ISLES BEACH FL 33160

Title CORRESPONDING SECRETARY Title T

Name JEAN, SABINE

Address 621 EDWIN STREET Name CHARLOT, ANNE MARIE D

City-State-Zip: HOLLYWOOD FL 33020

Address 84 NE 150 STREET

City-State-Zip: MIAMI FL 33161

Title TREASURER

Name MOREAU, ACHILLE FILS
Address 20521 NW 10TH AVE
City-State-Zip: MIAMI FL 33169

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

SIGNATURE: JEAN-PIERRE F. MARC-CHARLES

PASTOR

02/08/2021