

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005094

**Entity Name:** HAITIAN CHURCH OF GOD AND DELIVERANCE, INC.

**Current Principal Place of Business:**

376 NW 81 ST  
MIAMI, FL 33150

**Current Mailing Address:**

376 NW 81 ST  
MIAMI, FL 33150 US

**FEI Number:** 65-0964982

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

SEVERE, PASTOR, REV. JULES  
7620 NW 2ND AVENUE  
APT. 7  
MIAMI, FL 33150 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:** SEVERE, PASTOR REV. JULES

04/06/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEOP  
Name SEVERE, PASTOR, REV. JULES  
Address 150 N.E. 79 TH STREET APT 1101  
City-State-Zip: MIAMI FL 33138

Title BMS  
Name DERLINE, ETIENNE  
Address 410 NE 141 STREET  
City-State-Zip: NO. MIAMI BEACH FL 33167

Title BMVP  
Name ARISTILDE, LORIENT  
Address 7297 NW 2ND AVE  
City-State-Zip: MIAMI FL 33150

Title BVP  
Name SEVERE, EVANGL, LAHENS-FRITZNE  
Address 117 NE 87 STREET  
City-State-Zip: MIAMI FL 33138

Title BM  
Name CHARLES, EVANGL, BENITO  
Address 503 NE 65 STREET  
City-State-Zip: MIAMI FL 33138

Title BMS  
Name CELESTIN, WALKER  
Address 19601 NE 1ST AVENUE  
City-State-Zip: MIAMI GARDENS FL 33179

*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:** SEVERE, PASTOR , REV. JULES

REV

04/06/2021

Electronic Signature of Signing Officer/Director Detail

Date