

2015 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000005094

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

Current Principal Place of Business:

7171 NW 6TH COURT
MIAMI, FL 33150

FILED
Aug 10, 2015
Secretary of State
CR6666985003

Current Mailing Address:

7620 NW 2ND AVENUE
SUITE 7
MIAMI, FL 33150 US

FEI Number: 65-0964982

Certificate of Status Desired: No

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

08/10/2015

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

CEOP

08/10/2015

Electronic Signature of Signing Officer/Director Detail

Date