

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000000711

**FILED**  
**Apr 27, 2015**  
**Secretary of State**  
**CC1129371855**

**Entity Name:** HOUSE OF THE LIVING GOD OF HLG # 2 INC

**Current Principal Place of Business:**

13700 NE 10 AVE  
MIAMI, FL 33161

**Current Mailing Address:**

13700 NE 10 AVE  
MIAMI, FL 33161

**FEI Number:** 04-3609168

**Certificate of Status Desired:** No

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

LACROIX, ALEX  
531 NE 124 ST  
N MIAMI, FL 33161 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           VP  
Name           MICHEL SIMON, MIREILLE  
Address        905 NE 137 ST  
City-State-Zip: NORTH MIAMI FL 33161

Title           P  
Name           LACROIX, ALEX  
Address        531 NE 124 ST  
City-State-Zip: NORTH MIAMI FL 33161

Title           S  
Name           PAMPHILE-LACROIX, DARLINE  
Address        531 NE 124 ST  
City-State-Zip: NORTH MIAMI FL 33161

*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:** PASTOR ALEX LACROIX

**PRESIDENT**

**04/27/2015**

Electronic Signature of Signing Officer/Director Detail

Date