

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000007787

**FILED  
Apr 19, 2013  
Secretary of State  
CC7160879616**

**Entity Name:** EGLISE EVANGELIQUE LA REDEMPTION / REDEMPTION  
EVANGELICAL CHURCH INC.

**Current Principal Place of Business:**

1550 NE 168 ST  
SUITE 310  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

1550 NE 168 ST  
SUITE 310  
NORTH MIAMI BEACH, FL 33162 US

**FEI Number: 13-4308875**

**Certificate of Status Desired: No**

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

JOSEPH, SAGESSE PASTOR  
1550 NE 168 STREET  
SUITE 310  
NORTH MIAMI BEACH, FL 33162 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 PD  
Name JOSEPH, SAGESSE PASTOR  
Address 1550 NE 168 STREET., SUITE 310  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title VD  
Name GUERVIL, MAQUILENE VICE  
PRESIDENT  
Address 1550 NE 168 ST  
SUITE 310  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title TD  
Name GUERVIL, MAQUILENE TREASUR  
Address 1550 NE 168 ST  
SUITE 310  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title SD  
Name JOUBERT, YVENIE D. SECRETARY  
Address 1550 NE 168 ST  
SUITE 310  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title MB  
Name GUERRIER, GEORGES MEMBER  
Address 1550 NE 168 ST  
SUITE 310  
City-State-Zip: NORTH MIAMI BEACH FL 33162

*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: SAGESSE JOSEPH**

**PASTOR**

**04/19/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date