

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

DOCUMENT# N13000005036

Entity Name: FIRST BORN AGAIN BAPTIST OF NORTH MIAMI INC.

Current Principal Place of Business:

15395 NORTH MIAMI AVENUE
MIAMI, FL 33169

Current Mailing Address:

15395 NORTH MIAMI AVENUE
MIAMI, FL 33169 US

FEI Number: 59-6005181

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JULIEN, BENNJY
4070 NW 113TH TERRACE
SUNRISE, FL 33323 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: BENNJY JULIEN

12/11/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DEACON
Name BANAVRE, SEGUY
Address 5 NE 160 ST
City-State-Zip: MIAMI FL 33169

Title PRESIDENT
Name JULES, FRITZNER
Address 31 NE 152 ST
City-State-Zip: MIAMI FL 33162

Title TREASURER
Name JULIEN, BENNJY
Address 4070 NW 113TH TERRACE
City-State-Zip: SUNRISE FL 33323

Title SECRETARY
Name GUSTAVE, VIVIOSE
Address 374 NE 164 ST
City-State-Zip: MIAMI FL 33162

Title ASST. TREASURER
Name BEAUVAIS, JOHAM
Address 1801 NW 183 ST.
City-State-Zip: MIAMI FL 33056

Title ASST. SECRETARY
Name SAINT-JEAN, PIERRELA
Address 78970 NW 6TH COURT MIAMI, FL
33169
City-State-Zip: MIAMI FL 33169

Title DEACONESS
Name TATTEGRAIN, RAYMOND JEAN
Address 7817 BILTMORE BLVD
City-State-Zip: MIRAMAR FL 33023

Title MEMBER
Name JOACHAIN-JULES, MICHEL
FRANCOISE
Address 31 NE 152 ST
City-State-Zip: MIAMI FL 33162

Continues on page 2

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: FRITZNER JULES

PRESIDENT

12/11/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DEACON
Name	JULIEN, EDNER
Address	1801 NW 183 ST.
City-State-Zip:	MIAMI FL 33056