

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003007

FILED
Apr 27, 2007
Secretary of State

Entity Name: HAYTIAN AMERICAN DOCTOR'S HOSPITAL INC.

Current Principal Place of Business:

4237 HENDERSON BLVD
TAMPA, FL 33629

New Principal Place of Business:

4613 N. CLARK AVE.
TAMPA, FL 33614

Current Mailing Address:

PO BOX 1186
TAMPA, FL 33601

New Mailing Address:

FEI Number: 98-0425755 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERGMANN, FREDERICK J
4237 HENDERSON BLVD
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: CHADWELL, LARRY
Address: 845 BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33602

Title: VT () Delete
Name: SANON, CHRISTIAN
Address: 2137 W MARTIN LUTHER KING
City-St-Zip: TAMPA, FL 33607

Title: DS () Delete
Name: BERGMANN, FREDERICK
Address: 4237 HENDERSON BLVD
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: BERGMANN, FREDERICK
Address: 4613 N. CLARK AVE.
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FREDERICK J. BERGMANN

DS

04/27/2007

Electronic Signature of Signing Officer or Director

_____ Date