

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007842

FILED
Apr 27, 2008
Secretary of State

Entity Name: HAITIAN AMERICAN SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

13018 NORTHEAST 8TH AVENUE
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

13018 NORTHEAST 8TH AVENUE
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: 65-1152187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MANUEL, JUSTIN
Address: 13018 NORTHEAST 8TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33161

Title: SD () Delete
Name: GROGOIRE, JOSEE
Address: 13018 NORTHEAST 8TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33161

Title: TD () Delete
Name: NELSON, MARILINE G
Address: 13018 NORTHEAST 8TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: PRESSAGE, NADIA
Address: 13018 NORTHEAST 8TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33161

Title: TD (X) Change () Addition
Name: FOUQUET, ALEX
Address: 13018 NORTHEAST 8TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33161

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEX FOUQUET

TD

04/27/2008

Electronic Signature of Signing Officer or Director

Date