2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

Feb 07, 2002 8:00 am Secretary of State DOCUMENT # **N96000002068** 02-07-2002 90186 024 ****61.25 THE HAITIAN CORPORATION FOR MUSICAL DEVELOPMENT Principal Place of Business Mailing Address 11925 N E 2ND AVE P.O. BOX 680696 SUITE B-205 MIAMI FL 33168 NORTH MIAMI FL 33161 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0669331 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) STARR, GREGORY S 601 S ANDREWS AVE 2ND FL City Zip Code FT LAUDERDALE FL 33301 FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Addition TITLE PD ☐ Delete TITLE ☐ Change NAME JOSEPH, ANTOINE ROMEL NAME STREET ADDRESS STREET ADDRESS 11925 NE 2 AVE , B-205 CITY-ST-ZIP CITY-ST-ZIP <u>North Miami FL 33161</u> TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME Leroy, Pierre STREET ADDRESS STREET ADDRESS 3231 JASPER WAY CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33025 TITLE - 🔲 Delete TIT! F ☐ Change ☐ Addition NAME JOSEPH, SHERRY NAME STREET ADDRESS STREET ADDRESS 11925 NE 2 AVE. B205 CITY-ST-ZIP CITY-ST-ZIP <u>North Miami Fl 33161</u> TITLE □ Delete TITLE Change Change ☐ Addition Michel, Archange NAME MICHEL, ARCHANGE NAME 486 N.W. 165# St. Rd. Apt. B 601 STREET ADDRESS STREET ADDRESS 1851 N GLADES DR #4 Miami, FL 33169 CITY-ST-7IP CITY-ST-ZIP <u>n miami BCH FL 33162</u> TITLE Delete TITLE Addition NAME TINHOMME, JOLIUS NAME STREET ADDRESS STREET ADDRESS 12101 NW 21ST PLACE CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33167 TITLE □ Delete TITLE Change ☐ Addition NAME Jean-Pierre, Hermanise STREET ADDRESS STREET ADDRESS 1516 NE 1ST CT CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33435** 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if

FILED