2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2007
Secretary of State

DOCUMENT# N94000002394

Entity Name: THE ASSOCIATION OF HAITIAN EDUCATORS OF DADE, INC.

Current Principal Place of Business:

15966 S.W. 14 STREET
PEMBROKE PINES, FL 33027

New Principal Place of Business:

Current Mailing Address:

15966 S.W. 14 STREET
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: 65-0512234 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERTRAND, JEAN-ROBERT
15966 S.W. 14 STREET
PEMBROKE, FL 33027 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: P ( ) Delete
Name: LAGUERRE, FABRICE
Address: 6850 N.W. 38 DRIVE
City-St-Zip: LAUDERHILL, FL 33319

Title: VP ( ) Delete
Name: BERTRAND, JEAN-ROBERT
Address: 15966 S.W. 14 STREET
City-St-Zip: PEMBROKE PINES, FL 33027

Title: S ( ) Delete
Name: LOUBEAU, DIANA
Address: 3654 TARPON DRIVE
City-St-Zip: MIRAMAR, FL 33023

Title: T ( ) Delete
Name: POLYNICE, YVES
Address: 304 N.W 69 AVENUE #255
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LAGUERRE, FABRICE
Address: 470 N.W. 130 STREET
City-St-Zip: NORTH MIAMI, FL 33168

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

Title: S (X) Change ( ) Addition
Name: ABRAHAM, MILDRED
Address: 758 N.E. 127 STREET
City-St-Zip: NORTH MIAMI, FL 33161

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

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: FABRICE LAGUERRE P 04/28/2007

Electronic Signature of Signing Officer or Director — Date