

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000008036

**Entity Name:** HAITIAN NEIGHBORHOOD CENTER SANT LA, INC.

**FILED**  
**Mar 04, 2014**  
**Secretary of State**  
**CC7738478226**

**Current Principal Place of Business:**

5000 BISCAYNE BLVD.  
SUITE 110  
MIAMI, FL 33137

**Current Mailing Address:**

5000 BISCAYNE BLVD.  
SUITE 110  
MIAMI, FL 33137

**FEI Number:** 65-1080680

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

METELLUS, GEPSIE ME.D.  
5000 BISCAYNE BOULEVARD, SUITE 110  
SUITE 110  
MIAMI, FL 33137 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	BOC
Name	JEAN-BART , RULX
Address	17580 SW 29TH COURT
City-State-Zip:	MIRAMAR FL 33029
Title	BOT
Name	BRONSON-MARCELLUS, ASHAKI
Address	12655 NE 6TH AVENUE
City-State-Zip:	NORTH MIAMI FL 33161
Title	BD
Name	METELLUS, GEPSIE M
Address	515 NE 107TH STREET
City-State-Zip:	MIAMI FL 33161

Title	BOVC
Name	RIOS , ANA
Address	3560 NORTH 37TH STREET
City-State-Zip:	HOLLYWOOD FL 33021
Title	BOS
Name	TOUSSAINT , MARIE JO
Address	14751 NE 5TH AVENUE
City-State-Zip:	MIAMI FL 33161

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:** GEPSIE M. METELLUS

**EXECUTIVE DIRECTOR**

**03/04/2014**

Electronic Signature of Signing Officer/Director Detail

Date