DOCUMENT# N05000001198	_ F
Entity Name: HAITIAN AMERICAN CHAMBER OF COMMERCE OF FLORIDA, INC.	Secr 72
Current Principal Place of Business:	

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

10750 NW 6TH COURT MIAMI, FL 33168

Current Mailing Address:

713 NE 125TH STREET NORTH MIAMI, FL 33161 US

FEI Number: 20-2373322

Name and Address of Current Registered Agent:

JOSEPH, LUMANA 810 NE 125 STREET NORTH MIAMI, FL 33161 US

Certificate of Status Desired: No

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	: LUMANA JOSEPH			02/24/2023
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title	IMMEDIATE PAST CHAIR	Title	VICE-CHAIRMAN, 2ND	
Name	JOSEPH , LUMANA DR.	Name	BELIZAIRE, JEAN G.	
Address	810 NE 125 STREET	Address	713 NE 125 STREET	
City-State-Zip:	NORTH MIAMI FL 33161	City-State-Zip:	NORTH MIAMI FL 33161	
Title	CHAIRMAN	Title	VICE-CHAIRMAN	
Name	JEAN-GLAUDE, PRINSTON	Name	MOMPLAISIR , CARL	
Address	713 NE 125 STREET	Address	4000 HOLLYWOOD BLVD SUITE 555 SOUTH	
City-State-Zip:	NORTH MIAMI FL 33161	City-State-Zip:		
Title	DIRECTOR	Title	DIRECTOR	
Name	ST. FORT, EVANS	Name	METELLUS, GEPSIE	
Address	713 NE 125 STREET	Address	13390 WEST DIXIE HIGHWAY	
City-State-Zip:	NORTH MIAMI FL 33161	City-State-Zip:	NORTH MIAMI FL 33161	
Title	DIRECTOR	Title	SECRETARY	
Name	LETIN, MARIE L	Name	THOMAS, STEPHANIE DR.	
Address	103 SW VILLAGE CENTER BOX 37	Address	713 NE 125TH STREET	
City-State-Zip:	PORT SAINT LUCIE FL 34987	City-State-Zip:	NORTH MIAMI FL 33161	

Continues on page 2

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: DR. LUMANA JOSEPH

02/24/2023 **IMMEDIATE PAST CHAIR**

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 24, 2023 retary of State 257028957CC

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SEVERE, SANDRA DR.
Address	713 NE 125 STREET
City-State-Zip:	NORTH MIAMI FL 33161
Title	DIRECTOR
Name	TRANQUILLE, VLADIMIR
Address	713 NE 125 STREET
City-State-Zip:	NORTH MIAMI FL 33161
T :0 -	DIDECTOD
Title	DIRECTOR
Name	ARMAND, KRYSTEL
Address	713 NE 125 STREET
City-State-Zip:	NORTH MIAMI FL 33161

Title	TREASURER
Name	FREIMAN, LORY
Address	713 NE 125 STREET
City-State-Zip:	NORTH MIAMI FL 33161
Title	DIRECTOR
Title Name	DIRECTOR GASSANT, PEDRO
	2
Name	GASSANT, PEDRO