

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000005109

**Entity Name:** HELP HAITIANS LIVE INC.

**Current Principal Place of Business:**

5624 PINE CHASE DR  
3  
ORLANDO, FL 32808

**Current Mailing Address:**

5624 PINE CHASE DR  
3  
ORLANDO, FL 32808 US

**FEI Number:** 20-5868127

**Certificate of Status Desired:** Yes

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

EMILIEN, ANNA P  
5624 PINE CHASE DR  
3  
ORLANDO, FL 32808 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 P  
Name EMILIEN, ANNA  
Address 5624 PINE CHASE DR  
3  
City-State-Zip: ORLANDO FL 32808

Title VP  
Name MATHURIN, ABNET  
Address 4598 FRISCO CIR  
City-State-Zip: ORLANDO FL 32808

Title ENTREPRENEUR  
Name BEAUCEJOUR, LUDERSON  
Address 5624 PINE CHASE DR  
3  
City-State-Zip: ORLANDO FL 32808

Title SECRETARY  
Name ERLINE, JEANNOT  
Address 5727 LAKEFIELD  
City-State-Zip: ORLANDO FL 32808

*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:** ANNA EMILIEN

**PRESIDENT**

**05/01/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date