Entity Name: HAITI CHOLERA RESEARCH FUNDING FOUNDATION INC.

Current Principal Place of Business:
4700 LUCERNE LAKES BLVD. WEST #604
LAKE WORTH, FL 33467

Current Mailing Address:
4700 LUCERNE LAKES BLVD. WEST #604
LAKE WORTH, FL 33467 US

FEI Number: 46-3860027
Certificate of Status Desired: No

Name and Address of Current Registered Agent:
CAZEAU, PIERRETTE J MBA, MHA
C/O GLOBAL PUBLIC HEALTH DIPLOM
4700 LUCERNE LAKES BLVD. WEST #604
LAKE WORTH, FL 33467 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: PIERRETTE J CAZEAU
Electronic Signature of Registered Agent 01/02/2018

Officer/Director Detail:

Title P, T, CEO Name CAZEAU, PIERRETTE J
Address 4700 LUCERNE LAKES BLVD WEST 604
City-State-Zip: LAKE WORTH FL 33467

Title V, T, SECRETARY, POWER ATTORNEY Name HUEHN, THOMAS F
Address 4700 LUCERNE LAKES BLVD WEST 604
City-State-Zip: LAKE WORTH FL 33467

Title CD Name AGAMPODI, SUNETH BUDDHIK DR.
Address 4700 LUCERNE LAKES BLVD WEST 604
City-State-Zip: LAKE WORTH FL 33467

Title CHAIRMAN, OFFICER Name DEWI, CHRISTA
Address 4700 LUCERNE LAKES BLVD WEST 604
City-State-Zip: LAKE WORTH FL 33467

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: PIERRETTE J CAZEAU PRESIDENT & CEO 01/02/2018
Electronic Signature of Signing Officer/Director Detail Date