

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000008317

**Entity Name:** HAITELMEX FOUNDATION, INC.**Current Principal Place of Business:**548 NW 50TH AVENUE  
DELRAY BEACH, FL 33445**Current Mailing Address:**548 NW 50TH AVENUE  
DELRAY BEACH, FL 33445**FEI Number:** 46-5173508**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**AUGUSTE, ANOUSE  
548 NW 50TH AVENUE  
DELRAY BEACH, FL 33445 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	ESTIME, PATRICK
Address	548 NW 50TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33445

Title	VPS
Name	AUGUSTE, ANOUSE
Address	548 NW 50TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33445

Title	T
Name	STEME, VENITE R
Address	548 NW 50TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33445

Title	MARKETING INTERNATIONAL
Name	THENE , BENSON
Address	548 NW 50TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33445

Title	CULTUREL
Name	CAVANAQUE , JEAN DUKENS
Address	DELMAS 33 PRONG SAINT PATRICK ET P FRIDO NO 4
City-State-Zip:	PORT AU PRINCE OUEST DELMAS 00509

*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:** PATRICK ESTIME

PRESIDENT

04/29/2015

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