# 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1400008317

Entity Name: HAITELMEX FOUNDATION, INC.

# **Current Principal Place of Business:**

1322 NE 4TH AVE SUITE B FORT LAUDERDALE, FL 33304

# **Current Mailing Address:**

101 E TIFFANY DR APT 2 WEST PALM BEACH, FL, FL 33407 US

# FEI Number: 46-5173508

# Name and Address of Current Registered Agent:

AUGUSTE, ANOUSE 101 E TIFFANY DR APT 2 WEST PALM BEACH, FL 33407 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

### **Officer/Director Detail :**

Onicendired	Stor Detail.		
Title	PRESIDENT, IN ETATS UNIS, MÉXICO, HAITI	Title	VPS
Name	ESTIME, PATRICK	Name	AUGUSTE, ANOUSE
Address	1322 NE 4TH AVE	Address	1322 NE 4TH AVE SUITE B
City-State-Zip:	SUITE B FORT LAUDERDALE FL 33304	City-State-Zip:	FORT LAUDERDALE FL 33304
Title	т	Title	ASST. TREASURER
Name	ERNST, CAJUSTE SR.	Name	VENITE, ROSENIE STEME
Address	1322 NE 4TH AVE	Address	1322 NE 4TH AVE SUITE B
City-State-Zip:	SUITE B FORT LAUDERDALE FL 33304	City-State-Zip:	FORT LAUDERDALE FL 33304
<b>T</b> .(1-	EXECUTIVE SECRETARY	Title	CORRESPONDING SECRETARY
Title		Name	THENE, BENSON
Name	MOLIERE , PIERRE SR.	Address	ST PATRICK DELMAS 33 PROLONGEE
Address	1322 NE 4TH AVE SUITE B		RUE P FRIDO N0 04
City-State-Zip:	FORT LAUDERDALE FL 33304	City-State-Zip:	P-AU- PRINCE DELMAS 00509
Title	PRESIDENT AND REPRESENTATIVE	Title	C00
Name	PATRICK, ESTIME	Name	MARIE MICHELLE, MAYAS
	,	Address	ST PATRICK DELMAS 33 PROLONGEE
Address	NTRE MELCHOR PEREZ DE SOTO FUERZO 22 LT265		RUE P FRIDO N0 04
City-State-Zip:	TLALPAN, D.F. 14250	City-State-Zip:	P-AU- PRINCE, DELMAS 00509

PRESIDENT

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

Electronic Signature of Signing Officer/Director Detail

FILED Mar 30, 2017 Secretary of State CC3378299696

Certificate of Status Desired: No

Date

03/30/2017

# **Officer/Director Detail Continued :**

Title	EXECUTIVE SECRETARY	Title	RECEIVER
Name	PAUL, SAINTELUS	Name	GLENY, THENE
Address	ST PATRICK DELMAS 33 PROLONGEE RUE P FRIDO N0 04	Address	ST PATRICK DELMAS 33 PROLONGEE
City-State-Zip:	P-AU- PRINCE, DELMAS 00509	City-State-Zip:	RUE P FRIDO N0 04 P-AU- PRINCE DELMAS 00509
Title	VC		
Name	CARLOS, PHILIPPE	Title	CORRESPONDING SECRETARY
Address	ST PATRICK DELMAS 33 PROLONGEE & P FRIDO 04 P-AU- PRINCE DELMAS 00509	Name	DOROTHY, DEFONCE
		Address	ST PATRICK DELMAS 33 PROLONGEE & P FRIDO 04
City-State-Zip.		City-State-Zip:	P-AU- PRINCE DELMAS 00509
Title	SECRETARY		
Name	SYLVIE, HILAIRE	Title	ASST. SECRETARY
Address	ST PATRICK DELMAS 33 PROLONGEE & P FRIDO 04	Name	YOUSEMIE, HILAIRE
		Address	ST PATRICK DELMAS 33 PROLONGEE
City-State-Zip:	P-AU- PRINCE DELMAS 00509 HT		& P FRIDO 04
Title	EXECUTIVE SECRETARY	City-State-Zip:	P-AU- PRINCE DELMAS 00509
Name	GERMAIN, GEMAEL	Title	RECEIVER
Address	ST PATRICK & P FRIDO 04 DELMAS 33 PROLONGEE & P FRIDO 04	Name	QUINNCY, AUGUSTE
City-State-Zip:	P-AU- PRINCE DELMAS 00509	Address	1322 NE 4TH AVE SUITE B
		City-State-Zip:	FORT LAUDERDALE FL 33304