

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000002419

Entity Name: HAITIAN FAMILY FOUNDATION.INC

FILED
Apr 12, 2022
Secretary of State
9241543964CC

Current Principal Place of Business:

20801 BISCAYNE BOULEVARD
SUITE 403
AVENTURA, FL 33180

Current Mailing Address:

20801 BISCAYNE BOULEVARD
SUITE 403
AVENTURA, FL 33180 US

FEI Number: 86-2242630

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ETHER, BOURBON
140 NW 198 STREET
MIAMI,, FL 33169 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 LAMBERT, MACKENZY
Address 1985 NE 168TH STREET APT 1
City-State-Zip: N MIAMI BEACH FL 33162

Title VP
Name BENOIT, LIVINGSTON
Address 12450 NW 5AVE
City-State-Zip: MIAMI FL 33168

Title S.G
Name PIERRE. O, JEAN
Address 1650 NE 157TER
City-State-Zip: MIAMI FL 33162

Title TREA
Name JOSEPH, JHONNY
Address 2131 SW 68AVE
City-State-Zip: MIRAMAR FL 33023

Title DFR
Name EMILE, ELVIRE
Address 1985 NE 168 ST APT 1
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title DPR
Name PAYOUTE, GILBERT
Address 3 ALLIED DRIVE
City-State-Zip: DEDHAM 02026

Title CO-DFR
Name BENOIT, SONEL
Address 5633 ST JAMESCT APT 1W
City-State-Zip: PELOUSE OAL,IL IL 60453

Title DEL
Name JACQUES, BEATRICE
Address 1985 NE 168 ST APT 1
City-State-Zip: NORTH MIAMI BEACH FL 33162

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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: MACKENZY LAMBERT

PRESIDENT

04/12/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ADV
Name OSLINE , PIERRE
Address 1650 NE 157TH TERRACE
City-State-Zip: NORTH MIAMI BEACH FL