

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000000156

**FILED**  
**Sep 17, 2014**  
**Secretary of State**  
**CC5123450588**

**Entity Name:** HAITIAN-AMERICAN CENTER FOR ECONOMIC AND PUBLIC AFFAIRS (HACEPA), INC.

**Current Principal Place of Business:**

290 NW 165TH STREET, SUITE P800B  
MIAMI , FL 33169

**Current Mailing Address:**

P.O. BOX 551754  
MIAMI GARDENS, FL 33056 US

**FEI Number: 65-0672400**

**Certificate of Status Desired: No**

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

CANTAVE, JEAN-CLAUDE P  
1970 N.W. 180TH ST.  
MIAMI GARDENS, FL 33056 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 DP  
Name BOX, ANTHONY ESQ.  
Address 290 NW 165TH STREET, SUITE P800B  
City-State-Zip: MIAMI FL 33169

Title D, VP, TREASURER  
Name ARMAND, FRITZ  
Address 8430 JOHNSON STREET  
City-State-Zip: PEMBROKE PINES FL 33024

Title DS  
Name PHILOGENE, MARIE E  
Address 12620 NW 12TH AVENUE  
City-State-Zip: NORTH MIAMI FL 33167

Title D  
Name CANTAVE, JEAN-CLAUDE P  
Address 1970 NW 180TH STREET  
City-State-Zip: MIAMI GARDENS FL 33056

Title D  
Name DOMOND, LHERISSON DR.  
Address 2303 LUCAYA LANE, APT E2  
City-State-Zip: COCONUT CREEK FL 33066

*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: JEAN-CLAUDE P. CANTAVE**

**DIRECTOR**

**09/17/2014**

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

\_\_\_\_\_  
Date