

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

DOCUMENT# N98000004319

**Entity Name:** LITTLE HAITI GATEWAY, INC.

**Current Principal Place of Business:**

1398 SW 1 ST  
12TH FLOOR  
MIAMI, FL 33135

**Current Mailing Address:**

1398 SW 1 ST  
12TH FLOOR  
MIAMI, FL 33135

**FEI Number:** 91-1920705

**Certificate of Status Desired:** No

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

CARRFOUR SUPPORTIVE HOUSING, INC.  
1398 SW 1 ST  
MIAMI, FL 33135 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 SD  
Name CASALE, FRANKLYN  
Address 16400 NW 32 AVENUE  
City-State-Zip: MIAMI FL 33054

Title C  
Name TORRES, CHARLES  
Address 1398 SW 1 ST  
12TH FLOOR  
City-State-Zip: MIAMI FL 33135

Title T  
Name DANNER, STEPHEN  
Address 1101 BRICKELL AVE, STE 1402  
City-State-Zip: MIAMI FL 33131

Title P  
Name BERMAN, STEPHANIE  
Address 1398 SW 1 ST  
City-State-Zip: MIAMI FL 33135

Title VC  
Name PREY, CHAD  
Address 1398 SW 1 ST  
City-State-Zip: MIAMI FL 33135

*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:** STEPHANIE BERMAN

P

03/15/2015

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

\_\_\_\_\_  
Date