2018 FOREIGN NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F11000002715

Entity Name: HAND IN HAND FOR HAITI, INC.

Current Principal Place of Business:

1580 FRANCISCO STREET TORRANCE, CA 90501

Current Mailing Address:

C/O PHILIP HANCOCK 555 NE 185TH STREET SUITE 101

MIAMI, FL 33179 US

FEI Number: 27-1944899 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:

Address

Address

Electronic Signature of Registered Agent

Date

FILED

Jun 20, 2018

Secretary of State CC8534505981

Officer/Director Detail:

Title CHAIRMAN OF THE BOARD Title **PRESIDENT**

Name BRENNAN, EDWARD J Name BOTTRIE, OLIVIER

100 UNITED NATIONS PLAZA Address 3018 WEST LAKE ROAD Address NEW YORK CITY NY 10017 City-State-Zip: SKANEATELES NY 13152 City-State-Zip:

DIRECTOR Title **DIRECTOR** Title

Name KLEPACH, BERNARD MOODIE, STANLEY MARTIN Name

MIDDLETON

Address 33 INDIAN CREEK ISLAND ROAD BOSTON HOUSE, 69 BOSTON MANOR Address

City-State-Zip:

Name

INDIAN CREEK VILLAGE FL 33154

ROAD, BRENTFORD, MEDDLESEX

City-State-Zip: BRENTFORD MEDDLESEX

Title DIRECTOR

LAGUERRE, MAGALIE Title DIRECTOR

Name MEESHAERT, CEDRIC Address 1623 3RD AVENUE. 15C

12 ROND-POINT DES CHAMPS-

City-State-Zip: NEW YORK NY 10128 **ELYSEES**

PARIS PARIS 75008 City-State-Zip: Title CFO

HANCOCK, PHILIP Title VΡ Name

Name NEUMANN, BETH Address 555 NE 185TH STREET

> SUITE 101 C/O STABOARD CRUISE SERVICES

City-State-Zip: MIAMI FL 33179 8400 NW 36TH STREET SUITE 600

MIAMI FL 33166 City-State-Zip:

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.

PRESIDENT 06/20/2018 SIGNATURE: OLIVIER BOTTRIE