2017 FOREIGN NOT FOR PROFIT CORPORATION 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:

100 UNITED NATIONS PLAZA NEW YORK CITY. NY 10017 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:

Electronic Signature of Registered Agent

Address

City-State-Zip:

Officer/Director Detail :

Title CHAIRMAN OF THE BOARD Title **PRESIDENT**

BRENNAN, EDWARD J Name Name BOTTRIE, OLIVIER

100 UNITED NATIONS PLAZA Address 3018 WEST LAKE ROAD Address

NEW YORK CITY NY 10017 SKANEATELES NY 13152 City-State-Zip: City-State-Zip:

CFO Title Title DIRECTOR

JAMES, MARK NEVILLE Name MOODIE, STANLEY MARTIN Name

MIDDLETON

Address BOSTON HOUSE, 69 BOSTON MANOR

ROAD, BRENTFORD, MEDDLESEX

BRENTFORD MEDDLESEX City-State-Zip:

Title DIRECTOR Title S

Name KLEPACH, BERNARD Name SUZUKI, DAVID

Address 33 INDIAN CREEK ISLAND ROAD Address 8/F, CHINCHEM GOLDEN PLAZA, 77 INDIAN CREEK VILLAGE FL 33154

City-State-Zip: MODAY ROAD, TST EAST

City-State-Zip: **KOWLOON** Title DIRECTOR

Title **DIRECTOR** Name LAGUERRE, MAGALIE

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

12 ROND-POINT DES CHAMPS-

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

PARIS PARIS 75008 City-State-Zip:

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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.

01/10/2017 SECRETARY SIGNATURE: DAVID ALAN SUZUKI

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 10, 2017

Secretary of State

CC5607941118

Date

8/F, CHINCHEM GOLDEN PLAZA, 77

MODAY ROAD, TST EAST

KOWLOON

Officer/Director Detail Continued:

Title

NEUMANN, BETH Name

C/O STABOARD CRUISE SERVICES 8400 NW 36TH STREET SUITE 600 Address

City-State-Zip: MIAMI FL 33166