

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 731816

FILED
Feb 21, 2002 8:00 AM
Secretary of State

Entity Name: HAITIAN AMERICAN COMMUNITY ASSOCIATION OF DADE COUNTY (HACAD), INC.

Current Principal Place of Business:

100 N.E. 84TH ST., #101
MIAMI, FL 33138

New Principal Place of Business:

100 N.E. 84TH STREET
SUITE 101
MIAMI, FL 33138

Current Mailing Address:

100 N.E. 84TH ST., #101
MIAMI, FL 33138

New Mailing Address:

100 N.E. 84TH STREET
SUITE 101
MIAMI, FL 33138

FEI Number: 59-1689002

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ST PREUX, LUDNEL
100 N.E. 84TH ST., #101
MIAMI, FL 33138 US

Name and Address of New Registered Agent:

ST PREUX, LUDNEL
100 N.E. 84TH ST., #101
MIAMI, FL 33138 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: LUDNEL ST-PREUX

02/21/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: DELMONT, EDDY
Address: 645 YVES DAIRY RD., #216
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: TONDREAU, LUCIE
Address: 645 YVES DAIRY RD., #216
City-St-Zip: MIAMI, FL 33179

Title: TD () Delete
Name: JULES, HERBERT
Address: 1551 N.E. 167TH ST., #219
City-St-Zip: MIAMI, FL 33162

Title: VD () Delete
Name: PHANORD, HERNTZ
Address: 20022 N.E. 6TH CT
City-St-Zip: MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LUCIE TONDREAU

SD

02/21/2002

Electronic Signature of Signing Officer or Director

Date