4/16/01-90271-01

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Jun 21, 2001 8:00 am
Secretary of State
04-16-2001 90271 012 ****61.25

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000002008

1. Entity Name

Women Writers of Haitian Descent (WWOHD)

Principal Place of Business	Mailing Address
20850 San Simeon Way #603 Miami, FL 33179	PO Box 610756 N. Miami, FL 33261-0756

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number: 65-1010753 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Liliane Nerette Louis 14700 NE 2nd Court N. Miami, FL 33161 Maude Heurtelou 7500 SW 47th Ave, Coconut Creek, FL 33073	Name: Liliane Nerette Louis Street Address (P.O. Box Number is Not Acceptable): 147 NE 2nd Court City: N. Miami FL Zip Code: 33161

8. 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: Liliane N. Louis 5/15/01
(Typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to: Department of State

10. OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Joanne Hyppolite 6753 Dogwood Drive Miramar, FL 33023 D ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Marie Theodore-Pharel 12016 NW 13 Street Pembroke Pines, FL 33026 D ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-President Maude Heurtelou 7550 NW 47th Ave Coconut Creek FL 33073 D ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Liliane Nerette Louis 14700 NE 2nd Ct. N. Miami, FL 33161 D ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joanne Hyppolite 4/4/01 305-652-7420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

all 4 names listed above are current officers and directors. JH