FILED

03 MAY -1 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000002008

1. Entity Name
WOMEN WRITERS OF HAITIAN DESCENT, INC.

Principal Place of Business	Mailing Address
1444 NW 97TH AVENUE PEMBROKE PINES, FL 33024	P.O. BOX 610756 MIAMI, FL 33261

☐ CHECK HERE IF MAKING CHANGES

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 147 NE 2ND COURT NORTH MIAMI, FL 33161	Name: Joanne Hyppolite Street Address (P.O. Box Number is Not Acceptable): 6753 Dogwood Dr. City: Miramar FL Zip Code: 33023

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when reinstating)

FILE NOW: FEE IS $61.25

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

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HYPPOLITE, JOANNE 6753 DOGWOOD DRIVE MIRAMAR, FL 33023	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MARIE THEODORE-PHAREL 12016 NW 13th St. Pembroke Pines, FL 33026
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HEURTELOU, MAUDE 7660 NW 47TH AVENUE COCONUT CREEK, FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Irmine Milord 6855 W. Broward Blvd. #402 Plantation, FL 33317
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LILIANE NERETTE, LOUIS 14700 NE 2ND CT MIAMI, FL 33161	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Maude Heurtelou 7550 NW 47th Ave Coconut Creek, FL 33073
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THEODORE-PHAREL, MARIE 12016 NW 13 STREET PEMBROKE PINES, FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Joanne Hyppolite 6753 Dogwood Dr. Miramar, FL 33023
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500017833515 05/01/03--01061--016 **61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

CR2E037 (10/02)

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: _____ 5/1/03 (954)441-7782
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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