

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006649

FILED  
May 27, 2009  
Secretary of State

**Entity Name:** HAITIAN AMERICAN ALLIANCE YOUTH FOUNDATION INC.

**Current Principal Place of Business:**

8325 NE 2 AVE  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

8325 NE 2 AVE  
MIAMI, FL 33138

**New Mailing Address:**

**FEI Number:** 65-1057381      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

EDWARDS, DEBORAH  
4960 SW 72 AVE #301  
MIAMI, FL 33155 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HELELLUS, JEAN  
Address: 4095 LUDLAND RD  
City-St-Zip: MIAMI, FL 33155

Title: VD ( ) Delete  
Name: DEROSE, MARIE  
Address: 18870 NE 21ST AVE  
City-St-Zip: MIAMI, FL 33179

Title: TD ( ) Delete  
Name: MATHURIN, MARCEL  
Address: 14699 NE 16TH AVE  
City-St-Zip: MIAMI, FL 33181

Title: MD ( ) Delete  
Name: BOYER, DENIS  
Address: 511 NW 175TH ST  
City-St-Zip: MIAMI, FL 33162

Title: SD ( ) Delete  
Name: ANDRE, SHIRLEY  
Address: 1050 NE 131ST ST  
City-St-Zip: MIAMI, FL 33162

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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:

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

Title: D ( ) Change (X) Addition  
Name: DEROSE, PHILIPPE  
Address: 18870 NE 21 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33179\*

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PHILIPPE DEROSE

D

05/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date