

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2004 8:00 am
Secretary of State

03-31-2004 90038 025 ****70.00

DOCUMENT # N02000003908					
1. Entity Name HAITIAN COMMUNITY SERVICES OF SOUTH DADE, INC.					
Principal Place of Business 13327 SW 46TH LANE MIAMI FL 33175			Mailing Address 13327 SW 46TH LANE MIAMI FL 33175		
2. Principal Place of Business SAME			3. Mailing Address same		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. EI Number 33-1007697	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DURAND, VIOLETTE 13327 SW 46TH LANE MIAMI FL 33175				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 Violette Durand - VIOLETTE DURAND				DATE 3-23-04	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004			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	D	DURAND, VIOLETTE - President ☐ Delete	TITLE	Vice President ☒ Change ☒ Addition	
NAME			NAME	JOLY P. JOSEPH	
STREET ADDRESS		13327 SW 46TH LANE	STREET ADDRESS	13200 S.W. 128th Street	
CITY-ST-ZIP		MIAMI FL 33175	CITY-ST-ZIP	Miami, Fla. 33186	
TITLE	D	BARTHOLE, PAUL A - Vice President ☐ Delete	TITLE	Secretary ☒ Change ☒ Addition	
NAME			NAME	Francoise Leon	
STREET ADDRESS		14503 SW 106TH TERR.	STREET ADDRESS	19945 S.W. 135 Ave.	
CITY-ST-ZIP		MIAMI FL 33186	CITY-ST-ZIP	Miami, Fla. 33177	
TITLE	TD	OGEE, MARIE-Alice ☒ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS		7440 SW 153RD CT., UNIT 202	STREET ADDRESS		
CITY-ST-ZIP		MIAMI FL 33193	CITY-ST-ZIP		
TITLE	SD	DEGUERRE, TAINA ☒ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS		8305 SW 172ND ST.	STREET ADDRESS		
CITY-ST-ZIP		MIAMI FL 33157	CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 Violette Durand - VIOLETTE DURAND				Date 3-23-04 Daytime Phone # 305-585-6132	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					