

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 FEB -2 AM 8:00

DOCUMENT # N02000005300

1. Corporation Name

United Haitian American
Artist Inc

REINSTATEMENT 03-04

2. Principal Office Address

15002 NE 12 Ave

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Miami Florida

City & State

Zip

33161

Country

Zip

Country

000028013710

02/02/04--01061--012 **300.00

MRD

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

☒ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Yanick A Desgranges

Street Address (P.O. Box Number is Not Acceptable)

15002 NE 12 Ave Miami FL

Suite, Apt. #, Etc.

City

State

FL

Zip Code

33161

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Yanick A Desgranges
REGISTERED AGENT MUST SIGN

Date

1 29 04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
<u>President</u>	<u>Yanick Desgranges</u>	<u>15002 NE 12 Ave</u>	<u>Miami FL 33161</u>
<u>V</u>	<u>Karen Andrie</u>	<u>5342 SW 38 Ave</u>	<u>Fort Lauderdale FL</u>
<u>S</u>	<u>Larry Jattimore</u>	<u>15001 NE 11 Ct</u>	<u>Miami FL 33162</u>
<u>T</u>	<u>Farek Desgranges</u>	<u>15002 NE 12 Ave</u>	<u>Miami FL 33161</u>
<u>AT</u>	<u>Yolette Senatus</u>	<u>1245 NE 136 St</u>	<u>Miami FL 33163</u>

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

YANICK A. DESGRANGES
Yanick Desgranges
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1 28 04

Daytime Phone #

CR2E081 (10/02)