

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005300

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** UNITED HAITIAN AMERICAN ARTISTS, INC.

**Current Principal Place of Business:**

15002 NE 12TH AVE.  
MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

15002 NE 12TH AVE.  
MIAMI, FL 33161

**New Mailing Address:**

**FEI Number:** 87-0693426

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DESGRANGES, YANICK A  
15002 NE 12TH AVE.  
MIAMI, FL 33161 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: P ( ) Delete  
Name: DESGRANGES, YANICK A  
Address: 15002 NE 12TH AVE.  
City-St-Zip: MIAMI, FL 33161

Title: T ( ) Delete  
Name: DESGRANGES, FARAH  
Address: 15002 NE 12TH AVE.  
City-St-Zip: MIAMI, FL 33161

Title: V ( ) Delete  
Name: ANDRE, KAREN  
Address: 5342 SW 38TH AVE.  
City-St-Zip: MIAMI, FL 33312

Title: S ( ) Delete  
Name: LATTIMORE, LARRY  
Address: 15001 NE 11TH CT  
City-St-Zip: MIAMI, FL

Title: AT ( ) Delete  
Name: SENATUS, YOLETTE  
Address: 1245 NE 136TH TERR.  
City-St-Zip: MIAMI, FL 33163

**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:

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: YANICK A. DESGRANGES

P

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date