2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000008535

Entity Name: HAITIAN CITIZEN UNITED TASKFORCE INC.

FILED Apr 26, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1001 UPLAND RD WEST PALM BEACH, FL 33401 **Current Mailing Address: New Mailing Address:** 1001 UPLAND RD WEST PALM BEACH, FL 33401 FEI Number: 45-0490182 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DURANDISSE, REGINALE 1001 UPLAND RD WEST PALM BEACH, FL 33401 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition JOSEPH, GINETTE Name: Name: Address: Address: 1718 SOUTH DOUGLAS ST. City-St-Zip: City-St-Zip: LAKE WORTH, FL 33460 Title: Title: () Change (X) Addition () Delete Name: Name: ST. DUC, GERTY Address: Address: 544 JACKSON AVENUE C City-St-Zip: City-St-Zip: LAKE WORTH, FL 33460 Title: () Delete Title: () Change (X) Addition Name: PIERRE, SONNY Name: Address: Address: 315 ANDERSON RD City-St-Zip: City-St-Zip: LANTANA, FL 33462 () Change (X) Addition Title: () Delete Title: LOUIS JEUNE, PHILIPPE "BOB" Name: Name: P.O. BOX 3904 Address: Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33402 Title: () Delete Title: () Change (X) Addition DURANDISSE, REGINALE Name: Name: 1001 UPLAND RD. Address: Address: WEST PALM BEACH, FL 33401 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition WILNER, ALTHOURISTE Name: Name: Address: Address: 5904 LINCOLN CIR. WEST LAKE WORTH, FL 33463 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: REGINALE DURANDISSE, VIVE-PRESIDENT 0 04/26/2003