2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009737

FILED Apr 13, 2006 Secretary of State

Entity Name: HAITIAN EDUCATIONAL DEVELOPMENTAL ORGANIZATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8019 N. HIMES AVE 18106 CANAL POINTE STREET

TAMPA, FL 33647 311 TAMPA, FL 33614

Current Mailing Address: New Mailing Address:

8019 N. HIMES AVE PO.BOX: 15059 TAMPA, FL 33684

TAMPA, FL 33614

FEI Number: 54-2086891 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:

LOUISSAINT, PIERRE J LOUISSAINT, PIERRE J 18106 CANAL POINTE STREET 8019 N. HIMES AVE

TAMPA, FL 33647 TAMPA, FL 33614 US

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: LOUISSAINT PIERRE JH. 04/13/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PDT (X) Change () Addition () Delete LOUISSAINT, PIERRE J LOUISSAINT, PIERRE J Name: Name: 8019 N. HIMES AVE # 311 Address: 18106 CANAL POINTE STREET Address:

City-St-Zip: TAMPA, FL 33614 US City-St-Zip: TAMPA, FL 33647 US

Title: () Delete Title: (X) Change () Addition VERDIER, JEAN F Name: DR. VERDIER, JEAN-FRANCOIS Name: Address: 8019 N. HIMES AVE # 311 Address: 7395 TAM O' SHANTER BLVD. City-St-Zip: TAMPA, FL 33647 US City-St-Zip: N. LAUDERDALE, FL 33068 US

Title: () Delete Title: (X) Change () Addition

SAINT LOUIS, LEONNE Name: CHANAE, PATRICK Name:

8019 N. HIMES AVE # 311 16057 TAMPA PALM BLVD., PMB 44 Address: Address:

City-St-Zip: TAMPA, FL 33614 US City-St-Zip: TAMPA, FL 33647 US

(X) Change () Addition Title: SEC () Delete Title: AS.T Name: CADET, MAGDA Name: LOUISSAINT, ELISENA B 8019 N. HIMES AVE # 311 18106 CANAL POINTE STREET Address: Address:

City-St-Zip: TAMPA, FL 33614 US City-St-Zip: TAMPA, FL 33647 US

Title: () Delete Title: (X) Change () Addition LOUISSAINT, ELISENA ST.CLAIR, KERLANGE Name: Name:

8019 N. HIMES AVE # 311 14109 MOSSY GLEN LN. # 203 Address: Address:

TAMPA, FL 33614 US City-St-Zip: City-St-Zip: TAMPA, FL 33613 US

Title: () Delete Title: (X) Change () Addition

SAINT LOUIS, GERSEY GERMILUS, CADET Name: Name: Address: 8019 N HIMES AVENUE #311 Address: 533 38TH STREET

TAMPA, FL 33614 US WEST-PALM BEACH, FL 33407 US 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 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: LOUISSAINT PIERRE J PDT. 04/13/2006

Electronic Signature of Signing Officer or Director

Date