

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007840

FILED
Apr 26, 2006
Secretary of State

Entity Name: HAITIAN-AMERICAN CORPORATION, INC.

Current Principal Place of Business:

PO BOX 11865
NAPLES, FL 341011865

New Principal Place of Business:

550 NEW MARKET RD
SUITE 7
IMMOKALEE, FL 34142 US

Current Mailing Address:

PO BOX 11865
NAPLES, FL 341011865

New Mailing Address:

PO BOX 5055
IMMOKALEE, FL 34143 US

FEI Number: 20-3066589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INNOCENT, MARIE E
2301 ARBOUR WALK AV., STE 217
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

INNOCENT, MARIE E
4462 GULFVIEW BLVD
LEHIGH ACRES, FL 33971 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: MARIE INNOCENT

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: INNOCENT, MARIE E
Address: 519 GREENBRIAR BLVD.
City-St-Zip: ALTAMONTE SPRINGS, FL 327142318

Title: VT () Delete
Name: INNOCENT, JOSUE
Address: 519 GREENBRIAR BLVD.
City-St-Zip: ALTAMONTE SPRINGS, FL 327142318

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: INNOCENT, MARIE E
Address: 4462 GULFVIEW BLVD
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: VP,T (X) Change () Addition
Name: INNOCENT, JOSUE
Address: 4462 GULFVIEW BLVD
City-St-Zip: LEHIGH ACRES, FL 33971 US

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: MARIE INNOCENT

P

04/26/2006

Electronic Signature of Signing Officer or Director

Date