2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008269

FILED Sep 07, 2008 Secretary of State

Entity Name: HAITIAN ATHLETIC FOUNDATION INC.

Current P	Principal Place of Business:	New Principal Place	New Principal Place of Business:	
14610 SW MIAMI, FL				
Current N	Mailing Address:	New Mailing Addres	New Mailing Address:	
14610 SW MIAMI, FL				
FEI Number: FEI Number Applied For () FEI N In accordance with s. 607.193(2)(b), F.S., the corporation did not receive		FEI Number Not Applicable (X) ot receive the prior notice.	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
LOUIS, IP 14610 SW MIAMI, FL	/ 99 AVE			
	e named entity submits this statement for the e of Florida.	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () Delete LOUIS, IPHTON 14610 SW 99 AVE MIAMI, FL 33176	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete CARDOZO, DAVID 1760 S.W. 120 TERR. MIRAMAR, FL 33025	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () Delete ANTOINE, DANIEL 888 BRICKELL KEY DR., APT. #1800 MIAMI, FL 33131	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete BAUDUY, FRANCKALAIN 1833 S. OCEAN DR. #207 HALLANDALE, FL 33009	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: IPHTON LOUIS PRES 09/07/2008