2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009460

Entity Name: HAITIAN-AMERICAN ENTERTAINMENT GROUP INC.

FILED Apr 23, 2004 Secretary of State

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

1411 NW 113 TER MIAMI, FL 33167

Current Mailing Address: New Mailing Address:

P.O.BOX: 681731 MIAMI, FL 33168

FEI Number: 11-3707147 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

DUPONT, JASMINE L
778 NW 41 ST
MIAMI, FL 33125

AURELIEN, BENISSE
1411 NW 113 TER
MIAMI, FL 33167

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: BENISSE AURELIEN 04/23/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO () Delete Title: GM (X) Change () Addition
Name: AURELIEN, BENISSE Name: GUERDA, AURELIEN H MRS
Address: 1411 NW 113 TER Address: 1411 NW 113 TER

City-St-Zip: MIAMI, FL 33167 City-St-Zip: MIAMI, FL 33167

Title: Title: (X) Change () Addition () Delete Name: AURILIN, DAVID Name: AURILIN, DAVID MR. Address: 1411 NW 113 TER Address: 3864 NE 22ND WAY # 14 City-St-Zip: MIAMI, FL 33167 City-St-Zip: LIGHTHOUSEPOINT, FL 33064

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

 Name:
 PIERRE, GOLNAIL
 Name:
 JEAN, JOCELYN MR.

 Address:
 1090 NE 129 ST APT. 404
 Address:
 21446 TOWN LAKES DR. APT. # 628

Address: 1090 NE 129 ST APT. 404 Address: 21446 TOWN LAKES DR. APT. # 628 City-St-Zip: MIAMI, FL 33161 City-St-Zip: BOCA RATON, FL 33486

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

 Name:
 JOSEPH, NICOLE
 Name:
 DEDOUET, JACQUES MR.

 Address:
 778 NW 41 ST
 Address:
 P.O.BOX 641265

 City-St-Zip:
 MIAMI, FL 33125
 City-St-Zip:
 N.MIAMI BEACH, FL 33164

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: GUERDA HERMANN AURELIEN GM 04/23/2004