2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010032

FILED Apr 23, 2008 Secretary of State

Entity Name: COMMITTEE DE RELEVEMENT DE BAS-LIMBE, INC.

Current Pr	incipal Place	of Business:	New Principal Plac	New Principal Place of Business:	
1441 NW 29 AVENUE FT LAUDERDALE, FL 33311					
Current Ma	ailing Addres	ss:	New Mailing Addre	New Mailing Address:	
1441 NW 29 AVENUE FT LAUDERDALE, FL 33311					
FEI Number:	20-0429576	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
FELIX, MORVILIEN 460 N.W. 46TH AVE PLANTATION HOUSE, FL 33317 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:					
	Electror	nic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () FELIX, NORVIL 460 NW 46 AVE PLANTATION, F	Ξ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () PIERRE, ALIX 755 E. DALTON FT LAUDERDA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () DAQOBERT, LU 4901 N.W. 6TH PLANTATION, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AT () PIERRE, JOSU 3452 N.W. 37 A LAUDERDALE,	\VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () MICHEL, WILFI 1324 NW 2 AVE FT LAUDERDA	Ξ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () CHRISOSTOME 4191 NW 26TH LAUDERHILL, F	ST	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: FELIX NORVELIEN P 04/23/2008