2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003019

FILED Sep 06, 2006 Secretary of State

Entity Name: HAITIAN-AMERICAN BOYS 2 MEN CLUB, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:	
	/ 63RD AVE FL 330154471		
Current M	lailing Address:	New Mailing Address:	
	/ 63RD AVE FL 330154471		
	: 75-3185339 FEI Number Applied For () ace with s. 607.193(2)(b), F.S., the corporation did	FEI Number Not Applicable () Certificate of Status Desi	red ()
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent	:
17345 NW HIALEAH,	DN, MAC-KINLEY / 63RD AVE FL 330154471 US		
	e named entity submits this statement for the of Florida.	e purpose of changing its registered office or registered agen	t, or both,
n the Stat	e of Florida.	e purpose of changing its registered office or registered agen	t, or both,
n the Stat	e of Florida.		t, or both,
n the Stat	e of Florida. * RE:		
n the Stati SIGNATU DFFICER Title: Name: Address:	e of Florida. RE: Electronic Signature of Registered A	Agent Date	
n the Stati SIGNATU OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	e of Florida. RE: Electronic Signature of Registered. S AND DIRECTORS: P () Delete LAURISTON, MAC-KINLEY 17345 NW 63RD AVE	Agent Date ADDITIONS/CHANGES TO OFFICERS AND D Title: () Change () Addition Name: Address:	
n the Stat	e of Florida. RE: Electronic Signature of Registered A S AND DIRECTORS: P () Delete LAURISTON, MAC-KINLEY 17345 NW 63RD AVE HIALEAH, FL 330154471 V () Delete LEFEVRE, EMNINE 19051 NE 2ND AVE UNIT #1515	Agent Date ADDITIONS/CHANGES TO OFFICERS AND D Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:	

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: MAC-KINLEY LAURISTON P 09/06/2006