## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000004984

FILED Jaņ 0<u>8, 2</u>009 Secretary of State

Entity Name: HAITIAN AMERICAN LEADERSHIP ORGANIZATION, INC. **New Principal Place of Business: Current Principal Place of Business:** 8260 NORTH EAST 2ND AVENUE MIAMI, FL 33138 **Current Mailing Address: New Mailing Address:** P.O. BOX 827832 PEMBROKE PINES, FL 33082 US FEI Number: 30-0315992 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEVASSEUR, MARIA BREZAULT, THEDY 18523 SW 41ST STREET 1067 NW 49TH STREET MIRAMAR, FL 33029 MIAMI, FL 33127 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: THEDY BREZAULT 01/08/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition GOUSSE, ANGELO Name: Name: P.O. BOX 827832 Address: Address: City-St-Zip: PEMBROKE PINES, FL 33082 US City-St-Zip: Title: () Delete Title: () Change () Addition TOUSSAINT, GRACELLE Name: Name: Address: P.O. BOX 827832 Address: City-St-Zip: PEMBROKE PINES, FL 33082 US City-St-Zip: Title: () Delete Title: () Change () Addition MERISIER, HEROLD Name: Name: Address: P.O. BOX 827832 Address: City-St-Zip: PEMBROKE PINES, FL 33082 US City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition LEVASSEUR, MARIA Name: Name: BREZAULT, THEDY P.O. BOX 827832 Address: Address: P.O. BOX 827832 City-St-Zip: PEMBROKE PINES, FL 33082 US City-St-Zip: PEMBROKE PINES, FL 33082 US

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: THEDY BREZAULT Т 01/08/2009