

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 18, 2009
Secretary of State

DOCUMENT# N05000012012

Entity Name: INTERNATIONAL ORGANIZATION FOR HAITIAN DEVELOPMENT INC.**Current Principal Place of Business:**1400 NW 114 ST
MIAMI, FL 33167**New Principal Place of Business:****Current Mailing Address:**1400 NW 114 ST
MIAMI, FL 33167**New Mailing Address:**789 NE 125 ST
MIAMI, FL 33161**FEI Number:** 20-3628178**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MIRLANDE DUROSIER
1811 SW 120 TER
MIRAMAR, FL 33025 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DUROSIER, EDY
Address: 1400 NW 114 ST
City-St-Zip: MIAMI, FL 33167

Title: D () Delete
Name: JACQUES, DANIEL
Address: 1400 NW 114 ST
City-St-Zip: MIAMI, FL 33167

Title: D () Delete
Name: AMBROISE, ELIGENE
Address: 515 NE 141 ST
City-St-Zip: MIAMI, FL 33161

Title: D () Delete
Name: MAJORIE, JACQUES
Address: 13150 MEMORIAL HWY
City-St-Zip: N MIAMI, FL 33161

Title: D () Delete
Name: JEAN, FRANCOIS
Address: 1400 NW 114 ST
City-St-Zip: MIAMI, FL 33167

Title: D () Delete
Name: FLANKLYN, NORTELUS
Address: 320 NW 99 ST
City-St-Zip: MIAMI SHORES, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LAFONTANT, LEONIE
Address: 225 NE 46 ST
City-St-Zip: MIAMI, FL 33137

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DANIE, DUROSIER
Address: 1811 SW 120 TER
City-St-Zip: MIRAMAR, FL 33025

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDY DUROSIER

D

06/18/2009

Electronic Signature of Signing Officer or Director

Date