2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 28, 2009
Secretary of State

DOCUMENT# N06000000475

Entity Name: HAITIAN HOPE ORGANIZATION INC.

Current Principal Place of Business:

345 N.W 5TH AVENUE
FLORIDA CITY, FL 33034

New Principal Place of Business:

Current Mailing Address:

345 N.W 5TH AVENUE
FLORIDA CITY, FL 33034

New Mailing Address:

FEI Number: 20-4142567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JEAN, CHANGLAIS
345 N.W 5TH AVENUE
FLORIDA CITY, FL 33034 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: JEAN CHANGLAIS

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: G.D ( ) Delete
Name: JEAN, CHANGLAIS PRESID
Address: 345 N.W 5TH AVENUE
City-St-Zip: FLORIDA CITY, FL 33034

Title: D ( ) Delete
Name: PIERRE, KEVIN
Address: 14695 NE 18TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33181

Title: D ( ) Delete
Name: JEAN, GLARDIA
Address: 726 NW 3RD STREET
City-St-Zip: FLORIDA CITY, FL 33034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: G.D (X) Change ( ) Addition
Name: JEAN, CHANGLAIS PRESID
Address: P.O BOX 343558
City-St-Zip: FLORIDA CITY, FL 33034

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

Title: D (X) Change ( ) Addition
Name: MEGUINE, DARIUS
Address: P.O BOX 343558
City-St-Zip: FLORIDA CITY, FL 33034

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: JEAN CHANGLAIS PRES 09/28/2009

Electronic Signature of Signing Officer or Director — Date