


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 13, 2007 8:00 am
Secretary of State

08-13-2007 90019 049 ****70.00

DOCUMENT # N06000001128	
1. Entity Name HAITI NEEDS MY HELP, INC.	

Principal Place of Business 1131 ALABAMA AVE FT LAUDERDALE, FL 33312	Mailing Address 1131 ALABAMA AVE FT LAUDERDALE, FL 33312
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40140000



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

08092007 Chg-NP CR2E037 (12/06)

4. FEI Number 870762378	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HYPPOLITE, FRANCINOR 1131 ALABAMA AVE FT LAUDERDALE, FL 33312		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HYPPOLITE, FRANCINOR			NAME			
STREET ADDRESS	1131 ALABAMA AVE			STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 33312			CITY-ST-ZIP			
TITLE	VPD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PIERE, JEAN-CLAUDE			NAME			
STREET ADDRESS	1131 ALABAMA AVE			STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 33312			CITY-ST-ZIP			
TITLE	TD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEVASSEUR, ESTHER			NAME			
STREET ADDRESS	1131 ALABAMA AVE			STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 33312			CITY-ST-ZIP			
TITLE	ASD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HYPPOLITE, EZECHIEL			NAME			
STREET ADDRESS	1131 ALABAMA AVE			STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 33312			CITY-ST-ZIP			
TITLE	SD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JEAN-MARY, MANICIA			NAME			
STREET ADDRESS	1131 ALABAMA AVE			STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 33312			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **8/9/07** **954-599-1090**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

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ATTACHMENT

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Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number	
Zip		Country		08092007 Chg-NP CR2E037 (12/06)	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HYPOLITE, FRANCINOR 1131 ALABAMA AVE FT LAUDERDALE, FL 33312			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HYPOLITE, FRANCINOR 1131 ALABAMA AVE FT LAUDERDALE, FL 33312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PIERE, JEAN-CLAUDE 1131 ALABAMA AVE FT LAUDERDALE, FL 33312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEVASSEUR, ESTHER 1131 ALABAMA AVE FT LAUDERDALE, FL 33312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small>				<small>Daytime Phone #</small>	

ATTACHMENT
40128852

Fort Lauderdale, August 8, 2007

To: Florida Department of State
DIVISION OF CORPORATION
P. O. Box 6327
Tallahassee, Florida 32314


From: Haiti needs my Help, INC.
1131 Alabama Ave
Fort-Lauderdale, Florida 33312

Re: AMENDMENT.

Document number N06000001128
EIN 87 0762378

Be informed that the name of Haiti Needs My Help, INC. has been changed by our board in a meeting held for that purpose on Sunday August 5, 2007. The new name is: INTERNATIONAL HELP FOR HAITI, INC. Please, make the proper correction for us accordingly in our file and send us a new certification in the new name.

Thank you very much for your prompt understanding and assistance to this matter.
Sincerely,


Rev. Francis Hyppolite
D / President of IHFH, Inc.