2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

05-07-2007 90077 034 ****75.00
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FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N06000001519

1. Entity Name
NEW HOPE FOR HAITI FOUNDATION, INC.

Principal Place of Business	Mailing Address
3600 SO. STATE ROAD 7 MIRAMAR, FL 33023	3600 SO. STATE ROAD 7 MIRAMAR, FL 33023

REINSTATEMENT

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
3600 S. State Rd. 7	Same
Suite, Apt. #, etc.: #242	Suite, Apt. #, etc.
City & State: Miramar	City & State: FL
Zip: 33023 Country: USA	Zip: Country:

4. FEI Number: EIN 42-1694966 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VERITE-SICARD, MICHELLE 3600 SO. STATE ROAD 7 (441) MIRAMAR, FL 33023	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: N/A
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 May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Owner/Director Michelle Verite-Sicard 721 SW 69 Ave. P.Pines, FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Alex Raphael 721 SW 69 Ave Pembroke Pines, FL 33023 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Martine Theodore Vice President 6528 SW 26th St. Miramar, FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Oliver B. Louis 4016 Del Rio Way Sunrise, FL 33351 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Marlene Guillaume 937 SW 49th Ave. Plantation FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Public Relations Marie Evena La Falaise 7701 Sheridan Street Hollywood, FL 33024 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Rosa Perez 4016 Del Rio Way/Sunrise, FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M 11/2 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pastor Jean N. Georges Miami, FL 12385 N.W. 17th Street N. Miami, FL 33167 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pastor Dr. Pierre J. Raymond/ FL 4174 Inverrary Dr. Unit 213 Oakland Park, FL 33319 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Michelle Verite-Sicard 5/2/2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #