

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001589

FILED  
May 02, 2012  
Secretary of State

**Entity Name:** THE HAITIAN CULTURAL SOCIETY, INC.

**Current Principal Place of Business:**

1041 NE 178 TERRACE  
NORTH MIAMI BEACH, FL 33162 US

**New Principal Place of Business:**

272 NW 54 STREET  
MIAMI, FL 33127 US

**Current Mailing Address:**

1041 NE 178 TERRACE  
NORTH MIAMI BEACH, FL 33162 US

**New Mailing Address:**

272 NW 54 STREET  
MIAMI, FL 33127 US

**FEI Number:** 20-4363899

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SANON-JULES, SCHILLER E  
1041 NE 178 TERRACE  
NORTH MIAMI BEACH, FL 33162 US

**Name and Address of New Registered Agent:**

SANON-JULES, SCHILLER E  
274 NW 54 STREET  
MIAMI, FL 33127 US

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: SCHILLER E.SANON-JULES

05/02/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: SANON-JULES, SCHILLER E  
Address: 272 NW 54 STREET  
City-St-Zip: MIAMI, FL 33127 US

Title: V-P  
Name: SANON-JULES, MYRLANDE D  
Address: 272 NW 54 STREET  
City-St-Zip: MIAMI, FL 33127 US

Title: D  
Name: CHARLES, BURT  
Address: 1891 NE 178 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: D  
Name: DUVERGLAS, LESLY  
Address: 2741 NW 159 STREET  
City-St-Zip: MIAMI, FL 33172 US

Title: D  
Name: LEON, PIERRE- ANDRE  
Address: 3475 PINEWALK DR. NORTH APT # 203  
City-St-Zip: MARGATE, FL 33063 US

Title: D  
Name: ROUSSEAU, NESLY  
Address: 2322 HARDING STREET  
City-St-Zip: HOLLYWOOD, FL 33020 US

I hereby 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 all other like empowered.

SIGNATURE: SCHILLER E SANON-JULES

PRES

05/02/2012

Electronic Signature of Signing Officer or Director

Date