

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000012228

FILED
Aug 27, 2008
Secretary of State

Entity Name: THE POINT HAITIAN-AMERICAN RESOURCE CENTER INC.

Current Principal Place of Business:

3780 UNIVERSITY CLUB BLVD
3307
JACKSONVILLE, FL 32277

New Principal Place of Business:

3500 UNIVERSITY BOULEVARD
3406
JACKSONVILLE, FL 32277

Current Mailing Address:

3780 UNIVERSITY CLUB BLVD
3307
JACKSONVILLE, FL 32277

New Mailing Address:

3500 UNIVERSITY BOULEVARD
3406
JACKSONVILLE, FL 32277

FEI Number: 20-5951466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

STHILAIRE, SHEBA
3780 UNIVERSITY CLUB BLVD
3307
JACKSONVILLE, FL 32277 US

Name and Address of New Registered Agent:

STHILAIRE, SHEBA
3500 UNIVERSITY BOULEVARD
3406
JACKSONVILLE, FL 32277 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: SHEBA ST.HILAIRE

08/27/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHEBA, STHILAIRE
Address: 3780 UNIVERSITY CLUB BLVD 3307
City-St-Zip: JACKSONVILLE, FL 32277

Title: V (X) Delete
Name: PRINVIL, FRANTZ
Address: 3780 UNIVERSITY CLUB BLVD 3307
City-St-Zip: JACKSONVILLE, FL 32277

Title: TREA (X) Delete
Name: SAINTJUSTE, HERODE
Address: 3780 UNIVERSITY CLUB BLVD 3307
City-St-Zip: JACKSONVILLE, FL 32277

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHEBA, STHILAIRE
Address: 3500 UNIVERSITY BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32277

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

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: SHEBA ST. HILAIRE

PRES

08/27/2008

Electronic Signature of Signing Officer or Director

Date