

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001502

FILED
Feb 07, 2009
Secretary of State

Entity Name: FEDERATION OF HAITIAN-AMERICAN CYCLISTE, CORP.

Current Principal Place of Business:

7619 CORAL BLVD
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

7619 CORAL BLVD
MIRAMAR, FL 33023

New Mailing Address:

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

Name and Address of Current Registered Agent:

CHARLOTIN, MAX
204 NW 65 ST
MIAMI, FL 33138 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHARLOTIN, SADEL
Address: 7619 CORAL BLVD
City-St-Zip: MIRAMAR, FL 33023

Title: VP () Delete
Name: CHARLOTIN, MAX
Address: 204 NW 65 ST
City-St-Zip: MIAMI, FL 33138

Title: S () Delete
Name: PIERRE, SANDERS
Address: 1240 NW 117 ST
City-St-Zip: MIAMI, FL 33168

Title: T () Delete
Name: CHARLOTIN, HERLA
Address: 7619 CORAL BLVD
City-St-Zip: MIRAMAR, FL 33023

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: T (X) Change () Addition
Name: CHARLOTIN, HERLA
Address: 12445 NW 20 AVE
City-St-Zip: MIAMI, FL 33168

Title: C () Change (X) Addition
Name: CASSEUS, GARRY COORDIN
Address: 7619 CORAL BLVD
City-St-Zip: MIRAMAR, FL 33023

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: SADEL CHARLOTIN

P

02/07/2009

Electronic Signature of Signing Officer or Director

Date