

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001502

FILED
May 13, 2012
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 ()**

Name and Address of Current Registered Agent:

CHARLOTIN, SADEL
7619 CORAL BLVD
MIRAMAR, FL 33023 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: PR.
Name: CHARLOTIN, SADEL
Address: 7619 CORAL BLVD
City-St-Zip: MIRAMAR, FL 33023

Title: VP
Name: CHARLOTIN, SUDLAIR JEAN
Address: 12445 NW 20 TH AVENUE
City-St-Zip: MIAMI, FL 33168

Title: S
Name: PIERRE, SAUNDERS
Address: 7619 CORAL BLVD
City-St-Zip: MIRAMAR, FL 33023

Title: T
Name: PIERRE, SAUNDER'S
Address: 12445 NW 20 AVE
City-St-Zip: MIAMI, FL 33168

Title: C
Name: CASSEUS, GARRY COORDIN
Address: 7619 CORAL BLVD
City-St-Zip: MIRAMAR, FL 33023

Title: D
Name: CHARLOTIN, JEANSUDLER DIRECT
Address: 3909 SE 1ST PLACE
City-St-Zip: CAPE CORAL, FL 33904

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: SADEL CHARLOTIN

PR

05/13/2012

Electronic Signature of Signing Officer or Director

Date