2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N08000002613

Entity Name: H.E.L.P. FOR A BETTER HAITI CORP.

Current Principal Place of Business:

290 NW 165TH STREET
SUITE P-100
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

290 NW 165TH STREET
SUITE P-100
MIAMI, FL 33169

New Mailing Address:

7955 SW 155TH STREET
PALMETTO BAY, FL 33157

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

Name and Address of Current Registered Agent:

COLIMON, NATALIE
7955 SW 155TH STREET
PALMETTO BAY, FL 33157 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:	COLIMON, NATALIE	
Address:	7955 SW 155TH STREET	
City-St-Zip:	PALMETTO BAY, FL 33157 US	
Title:	VP	( ) Delete
Name:	FIGNOLE, CHRISTINA	
Address:	3680 N. 56TH AVENUE, UNIT 810	
City-St-Zip:	HOLLYWOOD, FL 33021 US	
Title:	CFO	( ) Delete
Name:	COLIMON, RICHARD	
Address:	1241 NORMANDY DRIVE, APT. 1	
City-St-Zip:	MIAMI BEACH,, FL 33141 US	
Title:	S	( ) Delete
Name:	ROWLES, JACQUELINE	
Address:	2935 NE 163RD STREET, APT. 2J	
City-St-Zip:	NORTH MIAMI BEACH, FL 33160 US	

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:	( ) 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: NATALIE COLIMON P 04/14/2009
Electronic Signature of Signing Officer or Director — Date