

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004392

FILED
Jun 24, 2009
Secretary of State

Entity Name: KENBEHAITI FOUNDATION, INC.

Current Principal Place of Business:

20505 EAST COUNTRY CLUB DRIVE #2134
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

20505 EAST COUNTRY CLUB DRIVE #2134
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 26-2501968 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

SCHULZ, KLAUS-PETER
20505 EAST COUNTRY CLUB DRIVE #2134
AVENTURA, FL 33180 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALEXIS-SCHULZ, EMELINE
Address: 20505 EAST COUNTRY CLUB DRIVE #2134
City-St-Zip: AVENTURA, FL 33180

Title: S () Delete
Name: SHULZ, KLAUS-PETER
Address: 20505 EAST COUNTRY CLUB DRIVE #2134
City-St-Zip: AVENTURA, FL 33180

Title: D () Delete
Name: FAN, JEAN CLAUDE
Address: 11607 CANAL DR APT 1
City-St-Zip: NORTH MIAMI, FL 33180

Title: D () Delete
Name: PRUDENT, LESLY
Address: 185 NE 65TH ST
City-St-Zip: MIAMI, FL 33127

Title: D () Delete
Name: ALTINE, EDDY
Address: 9018 SW 150 AVE
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: SCHULZ, KLAUS-PETER
Address: 20505 EAST COUNTRY CLUB DRIVE #2134
City-St-Zip: AVENTURA, FL 33180

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: KLAUS-PETER SCHULZ

RA

06/24/2009

Electronic Signature of Signing Officer or Director

Date