2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010327

Entity Name: AHPCPEYC INC.

Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9047 EASTHAVEN CT NEW PORT RICHEY, FL 34655

Current Mailing Address: New Mailing Address:

9047 EASTHAVEN CT NEW PORT RICHEY, FL 34655

FEI Number: 75-3241451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JEANTY, JEAN-MARIE F 9047 EASTHAVEN CT

NEW PORT RICHEY, FL 34655 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:

() Delete MURAT, ODETTE Name: POWDERHORN RD Address:

City-St-Zip: PATERSON, NY 12563

Title: VC () Delete ALEXIS, MARIE-CARMELLE Name:

Address: 87-30 204TH STREET, #46 City-St-Zip: JAMAICA, NY 11423

Title: CD () Delete CAJOU, JEANINA Name: Address: 111-05 205TH ST City-St-Zip: HOLLIS, NY 114122228

Title: TD () Delete

Name: DELSOIN, MAX Address: 1616 W TOUHY, UNIT E City-St-Zip: CHICAGO, IL 60626

Title: () Delete ST. PHARD, LEMERCIER Name: 6481 BOIS DE COULONGE Address: City-St-Zip: ANJOU QC H1K 3Z9, XX XX ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

ALADIN, ANDRE Name:

Address: 118-51 234TH STREET

City-St-Zip: CAMBRIA HIGHTS, NY 11411 US

Title: (X) Change () Addition Name: ALEXIS, MARIE-CARMELLE Address: 87-30 204TH STREET, #46 City-St-Zip: HOLLIS, NY 11423 US

Title: CD (X) Change () Addition

CAJOU, JEANINA Name: 111-05 205TH ST Address:

City-St-Zip: HOLLIS, NY 114122228 US

(X) Change () Addition Title: TD

Name: DELSOIN, MAX 1616 W TOUHY, UNIT E Address: City-St-Zip: CHICAGO, IL 60626 US

Title: (X) Change () Addition

ST. PHARD, LEMERCIER Name: 6481 BOIS DE COULONGE Address: City-St-Zip: ANJOU, QC H1K 3Z9 CA

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: JEAN-MARIE F JEANTY CM 04/23/2009