

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004494

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** FOUNDATION TO CHANGE THE IMAGE OF HAITI, INC.

**Current Principal Place of Business:**

3083 NW 30TH PLACE  
FT. LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 6061  
FT. LAUDERDALE, FL 33310

**New Mailing Address:**

PO BOX 6061  
FT. LAUDERDALE, FL 33310

**FEI Number:** 27-2659620

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STINFIL, ROBINSON  
3083 NW 30TH PLACE  
FT. LAUDERDALE, FL 33311 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: PD  
Name: STINFIL, ROBINSON  
Address: 3083 NW 30TH PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: VD  
Name: GEDEON, JEAN MARC  
Address: 1863 OPALOCKA BLVD.  
City-St-Zip: OPALOCKA, FL 33054

Title: SD  
Name: PIERRE, MIGUELAILLE  
Address: 2800 NW 56 AVE G208  
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: CD  
Name: BOIGRIS, JESSICA  
Address: 18861 NW 19 STREET  
City-St-Zip: PEMBROKE PINES, FL 33029

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: ROBINSON STINFIL

PD

03/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date