2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 27, 2000 8:00 am
Secretary of State
05-16-2000 90121 026 ****61.25

DOCUMENT # N18384

1. Entity Name

CENTRE COMMUNAUTAIRE HAITIENNE D'EDUCATION ET DE

R

Principal Place of Business	Mailing Address
14250 N. Mia. Ave. Mia. Fla. 33168 ~~8340 NE 2ND AVE~~ ~~STE 201~~ ~~MIAMI FL 33138~~ ~~US~~	P.O. Box 530155 ~~8340 NE 2ND AVE~~ ~~STE 201~~ ~~MIAMI FL 33138-3887~~ ~~US~~ Mia. Shores Mia Fl. 33153-0155

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
14250 N Miami Ave	PO Box 530155
Suite, Apt. #, etc.	Suite, Apt. #, etc. Miami Shores
City & State Miami FLORIDA	City & State Miami, FLORIDA
Zip 33168 Country USA	Zip 33153 Country USA

4. FEI Number 65-0131211 ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Rev. Jacques Mompremier ~~GUERRIER, BERONEL~~ P.O. Box 530155 ~~88 NW 85 ST.~~ ~~MIAMI FL 33150~~ Mia. Shores Mia. Fla. 33153-0155	Name JACQUES MOMPREMIER Street Address (P.O. Box Number is Not Acceptable) 325 N.E. 110 Terrace City Miami FL Zip Code 33161

8. 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 JACQUES MOMPREMIER 06-01-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~P~~ V.P GUERRIER, BERONEL 88 NW 85 ST. MIAMI FL 33150	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P.D Jacques Mompremier 325 N.E. 110th Terr. Mia. Fl. 33161	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV ~~BELAIR, JEAN~~ ~~183 N.E. 54 STREET~~ MIAMI FL 33137	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Rev. Neville A. Wilson 3034 N.W. 195 Terr. Mia. Fla. 33056	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~BAZIN, FRITZ~~ ~~6700 N MIAMI AVE.~~ ~~MIAMI FL 33150~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S. Elaine Williams 7110 N.W. 179th St #105 Mia. Fl. 33015	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST ~~BERIZAIRE, ANICK~~ ~~1240 NW 128 ST.~~ ~~MIAMI FL 33167~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/S Rev. L. Smith 14250 N. Ave. Mia. Fla. 33168	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~DOMOND, FRANCISCOT~~ ~~561 NE 79 ST.~~ ~~MIAMI FL 33138~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T. G. Charlemagne 14701 N.W. 3rd Ave Mia. Fla. 33168	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ~~WILKES, C.H. R~~ ~~400 N.W. 5TH AVE.~~ ~~MIAMI FL~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S.D. Raymond Wilkinson 4410 S. Spur Dr. Mia. Fla. 33161	☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jacques Mompremier 06-25-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #