NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 15, 2002 8:00 am Secretary of State

OMITORIAL BUSINESS REPORT (UBR)				May 13, 2002 6.00 am			
DOCUME 1. Entity Name	. /				Secretary of State 05-15-2002 90066 016 ****70.00		
Haitian (rganization of W	omen, Inc.	· 🗸	35 15 250			
162 SW Fi	irst Ave, Homeste	ad, FL 33030	•				
	· ·		500				
חנ	NOT WRIT	E IN THIC	CDACE		•		
υ.	S NO! WILL		SPACE				
2. Principal Place	of Business	3. Mailing Address	·		•		
162 SW FirstvAveRowestend, F1 162eSW First							
Suite, Apt. #, eti	c.	Suite, Apt. #, et	c.	DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number	I A - B - I F		
	ead, Florida	Homestead	, Florida	65-0341	706 Applied For Not Applicat		
^{Zip} 33030	Country Dade	Zip 33030	Country Dade	5. Certificate of Status Desired	XX \$8.75 Additional		
\$ af <8 ?'		33030	Dade	7. Name and Address of Curre	Fee Required		
		• 	Name	Micheline Ducena	it registered Agent		
	DO NOT V	VRITE	Street Addres	is (P.O. Box Number is Not Acceptal	ole)		
	IN THIS S	PACE					
		IAUL		17781 SW 113 Ave			
	, ,		City	Miami, FL	FL Zip Code 33157		
8. The above name	ed entity submits this statement	for the purpose of chang	ing its registered office or regis	stered agent, or both, in the state of F	iorida.		
	(D						
SIGNATURE	- Mylin	سعي	Micheline Ducena.	Executive Director	r 4/25/02		
Signat.	ire, typed or printed name of registered age	ent and title if applicable.	(NOTE: Registered Agent signature requ	fred when reinstating)	DATE		
faiti	FEE IS \$61.25		n Campaign Financing		ake Check Payable to		
	al or Amended UBR	Hustr	und Contribution.	Added to Fees	Department of State		
10.	OFFICERS AND D	DIRECTORS		2 Prince 1982			
TITLE	Chairperson		TITLE &				
NAME STREET ADDRESS	15(01 gr. 102)		NAME	•	,		
CITY-ST-ZIP	Miami, FL 331		STREET ADDRESS CITY+ST-ZIP		4		
TITLE	Treasurer		TITLE À				
NAME	Marie-Therese	z Zenon	NAME		,		
STREET ADDRESS CITY-ST-ZIP	11271 SW 112	CT	STREET ADDRESS	and the second of the second			
- - -	Miami, FL 331		CITY-ST-ZIP				
TITLE NAME	Jean Desroule		TITLE				
STREET ADDRESS	12600 SW 189 Miami, FL 331		NAME. STREET ADDRESS				
CITY-ST-ZIP	uramr, er 331	177	CITY-ST-ZIP	DO NOT	WRITE		
MILE	Secrétary una		TITLE	The state of the s	· · · · · · · · · · · · · · · · · · ·		
NAME	Yôlâinë Numa	SI	NAME	IN THIS	SPACE		
STREET ADORESS CITY-ST-ZIP	12125 SW 1871 Miami; FL 331	Street	STREET ADDRESS	•	\$		
ITLE	Micheline Duc		CITY-ST-ZIP §				
IAME	Executive Dir		TITLE I				
TREET ADDRESS	17781 SW 113		STREET ADDRESS	**************************************			
CITY-ST-ZIP	Miami, FL 331		CITY-ST-ZIP	***	s		
ITLE			TITLE	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
TREET ADDRESS			NAME				
ITY-ST-ZIP			STREET ADDRESS				

SIGNATURE:

DILLuceus

Micheline Ducena, Exec. Director 4/25/02

^{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 attachment with an address, with all other like empowered.