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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Mar 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE: X

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HAITIAN AMERICAN FOUNDATION, INC.

Son No. 200 ME SIDITE 103 SUITE 103	District Address					-					
SUITE 103 MANI FL 30186 MANI FL 30189-3007 3. Della incorporated of Opalified 3. Dell	Principal Place	e of Business	Mailing Address								
Amail FL 33138 Amai	8340 NE 2ND A	V E.									
2. Princesal Prince of Business 2. Princesal Prince of Business 3. Data bocognizated of Cuulfire 3. Data bocognizated of Cuulfire 3. B 3 S N N C	SUITE 103										
Substitution Subs	MIAMI FL 33138				3. Date incorporated or Qualified 02/12/1990	Date Incorporated or Qualified 3a. Date of Last Report 02/12/1990 04/15/1996					
Suite, Age if, etc. Suite, Age if, etc.			2a. Mailing Address	Mailing Address					Ap	plied For	
S. Certificate of Status Desired Status Sta	n 838	O NE 2nd Ave	26 8380 N	8380 N.E Ind Hoe					No	t Applicable	
City & Strate 22	Suite, Apt	#, étc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired				
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9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Suppose the Color of the provisions of Sections 617 0502 and 617 1506. Foorids Statutes, the above-named cooperation submits its statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes, the above-named cooperation submits its statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes, the above-named cooperation submits its statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes, agent and the favorable was submits of the provisions of sections 617 0503, Florida Statutes, agent agent and agent and the favorable was submits of the provisions of the provisions of sections 617 0503, Florida Statutes, agent agent and agent and the favorable was submits of the provisions of the provisions of sections 617 0503, Florida Statutes. SIGNAT URE System Agent specified agent, or both, in the State of Florida Statutes. SIGNAT URE System Agent specified agent, or both, in the State of Florida Statutes. SIGNAT URE System Agent specified agent, or both, in the State of Florida Statutes. SIGNAT URE System Agent specified agent, or both, in the State of Florida Statutes. SIGNAT URE System Agent specified agent agent and the favorable specified agent specified agent age	3 MIA										
Some and Address of Current Registered Agent COLETTE HALL 840-NE-2ND-AVE: 6417E-103 MIAMIF I, 33138 11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Foords Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am internal with, and accept the children of Such change was authorized by the corporation's board of directors. I hereby accept the elapsion of Section 17 0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12 NAWE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12 NAWE 12. CASTHELY, FRANKLIN 12. PARTICIPATION OF THE PROPERTY OF	در خرار ا		1 '			ϵa					
COLETTE HALL 840 NE 2ND AVE: SUFFE 103 MAMI FL 33138 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation within this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida. Stoch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signed, and only a complete the composition of the purpose of changing its registered office or registered agent, or both, in this State of Florida. Stoch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signed. I am familiar with, and accept the chilipations of, Section 617,0503, Florida Statutes. SIGNATURE SECONATURE COFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTE CASTHELY, FRANKLIN B340 NE 2ND AVE, STE 103 MAMI FL D GELETE 11 III.E D GELETE 12 AUME 13. SIRECT ADDRESS MAMI FL D GELETE 13. TITLE Change Change Addition Addit	14 20			[30]	(1. C	21 17					
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SUFFE 103- MIAMI FL 33138 11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and maillar with, and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE											
MIAM FL 33138 A	· · · · · · · · · · ·					0580	DIE GRA HIP	<u> </u>			
11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby eccept the epiporitiment as registered special and artificial with, and accept the obligations of, Section 617 3003, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered collection. I hereby eccept the epiporitiment as registered special and artificial with, and accept the obligations of, Section 617 3003, Florida Statutes required when releasing. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P					~						
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SIGNATURE Segreture typed or printed name of registered appel and total of applicable. (NOTE Registered Agent alignature regulated when reintating) DATE	office or re	egistered agent, or both, in the State o	f Florida. Such change was	authorize	d by th	ne corporation	n's board of directors. I hereby accep	t the app	ointment as	registered	
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14. I do 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 annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name	CITY-ST-ZIP										
I am an officer or director of the corporation of t	14. I do herel	by certify that the information supplied	with this filing does not qua	lify for the	exem	ption stated i	in Section 119.07(3)(i), Florida Statute	s. I furthe Leffect es	certify that	the derivative that	
	l am an o	fficer or director of the corporation of the	po eceiver or trustee empo	wered to	execut	e this report	as required by Chapter 617, Florida S	tatutes; a	nd that my	name	