

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47311

FILED
Apr 15, 2006
Secretary of State

Entity Name: HAITI VISION INC.

Current Principal Place of Business:

1506 BROADWAY
#2
RIVIERA BEACH, FL 33404 US

New Principal Place of Business:

Current Mailing Address:

1506 BROADWAY
#2
RIVIERA BEACH, FL 33404 US

New Mailing Address:

FEI Number: 65-0318679 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUDRE, DANIEL
3883 HIAWATHA AVE # 3
WEST PALM BEACH, FL 33409 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 () Delete
Name: SUDRE, DANIEL
Address: 3883 HIAWATHA AVE.
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: VPD () Delete
Name: EUGENE, JACQUES D
Address: 5452-6 EAST MICHIGAN ST.
City-St-Zip: ORLANDO, FL 32812 US

Title: DS () Delete
Name: GREGOIRE, ARNOLD
Address: 1544 6TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33311 US

Title: DS () Delete
Name: SUDRE, MARIE C
Address: 514 B INDEPENDENCE RD
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: DT () Delete
Name: LUBIN, ALCENITA
Address: 822 HELENA DRIVE
City-St-Zip: LAKE WORTH, FL 33461 US

Title: D () Delete
Name: ALCEUS, EDDY
Address: 1544 N.W. 6TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33311 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: NOEL, GIMMY
Address: 4007 BROADWAY
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL SUDRE

PD

04/15/2006

Electronic Signature of Signing Officer or Director

Date