## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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## **FILED** Jul 03, 2006 8:00 am **Secretary of State**

07-03-2006 90001 043 \*\*\*\*70.00

Daytime Phone #

HAITIAN-AMERICAN CENTER FOR ECONOMIC AND PUBLIC AFFAIRS (HACEPA), INC. 40097658 Principal Place of Business Mailing Address 8325 NE 2ND AVENUE P.O. BOX 380327 MIAMI, FL 33238 MIAMI, FL 33138 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06292006 CR2E037 (4/06) Applied For City & State City & State 4. FEI Numbe 65-0672400 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CANTAVE, JEAN-CLAUDE P 1970 N.W. 180TH ST. Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33056 Zip Code City FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be  $\Box$ Trust Fund Contribution Added to Fees Florida Department of State Due by September 6, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. DS TITLE ☐ Delete TITLE PHILOGENE, MARIE E NAME NAME Louis, Berthony 8324 N Nebraska Ave Tampa Florida 33682 12620 NW 12TH AVENUE STREET ADDRESS STREET ADDRESS Avenue CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI, FL. 33168 X Addition TITLE Change Delete TITLE JEAN-LOUIS, ROLAND DR. NAME Armand, Fritz 13785 NW 5TH AVE STREET ADDRESS STREET ADDRESS 1805 NW 175th Street Miami Gardens Florida CITY-ST-ZIP MIAMI, FL 33168 CITY-ST-ZIP 33056 X Addition ☐ Delete Change TITLE Jolibois, Jr, Sylvan Dr. 6321 SW 63rd Street Miami Florida 33143 DESTINE, JEAN-CLAUDE NAME NAME STREET ADDRESS 345 NW 101ST ST STREET ADDRESS MIAMI, FL 33150 CITY-ST-ZIP CITY-ST-ZIP DP TITLE Delete TITLE **K**Change Addition Mondesir, Leon T 90 m.E 54st Street Miami Florida 33137 MONDESIR, LEON T NAME NAME STHEET ADDRESS 580 NE 133RD ST STREET ADDRESS CITY-ST-7IP NORTH MIAMI, FL CITY-ST-ZIP ☐ Delete **X**Change Addition TITLE TITLE D NAME MIRVILLE, ERNST Mirville, Ernst Dr. 8325 NE 2nd Avenue, Miami Florida 33138 STREET ADDRESS 12320 NE 6TH AVENUE STREET ADDRESS Suite 205 CITY-ST-7IP NORTH MIAMI, FL 33161 CITY-ST-ZIP TITLE D Addition ☐ Delete TITLE ☐ Chance

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 recorn 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

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

NARCHET, FLAYEL

7624 N.E. 2ND AVE

MIAMI, FL

6-28-2006 (305) 759-4795 PRINTED NAME OF SIGNING OFFICER OF DIRECTOR