1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N9500001995

1. Corporation Name

HAITIAN EVANGELICAL CHURCHES UNITED, INC.

Principal Place of Business

Mailing Address

May 05, 1999 8:00 am § Secretary of State

05-05-1999 90079 027 ****61.25

716 MICHIGAN AVE #304 716 MICHIGAN AVE #304 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139						
2. Principal	Place of Business	2a. Mailing Address			3. Date Incorporated or Qualifed	
21		26		04/26/1995		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27			65-085 0325	Not Applicable
City & St	ate	City & State			5. Certifcate of Status Desired	\$8.75 Additional Fee Required
Zip	Country 25	Zip	Countr	у	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
STERLING, JOSEPH E 716 MICHIGAN AVE., #304 MIAMI BEACH FL 33139 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes office or registered agent, or both, in the State of Florida, Such change was au			8. 8. s, the about thorized b	4 City	reporation submits this statement for the purpos	FL 85 Zip Code se of changing its registered as registered
agent. I SIGNATUR	am familiar with, and accept the of	oligations of, Section 617.0503, Flori	ida Statute	S.	ired when reinstating) DAT	E
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	
TITLE	D	☐ DELETE	1.1 TITLE			Change Addition
NAME	STERLING, JOSEPH E		1.2 NAME			
STREET ADDRESS 716 MICHIGAN AVE., #304			1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33139		1.4 CITY-	ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
) NAME	BLEMUR. REYNOLD		2.2 NAME	: 1	,	•
STREET ADDRES			2.3 STRE	ET ADDRESS		

2. 4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

□ DELETE

☐ DELETE

MIAMI FL 33161 CITY-ST-ZIP 14. 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 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 the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes; and that my name appears in officer or director of the corporation. Block 12 or Block 13 if changed, or

SIGNATURE: 9

MIAMI FL 33161

535 NW 97TH ST

MIAI FL 33150

TOUSSAINT, LOUIS F

Jean-Louis, Jules

17830 NW 28TH CT MIAMI FL 33056

561 NW 194TH ST

MIAMI FL 33169

JOSEPH, LEON

12655 NE 1ST AVE

Jean-Phillipe, Jean H

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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Addition |

☐ Addition

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Change