

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003613 (5)

1. Corporation Name

ORGANISATION DES TRAVAILLEURS HAITIENS A L'ETRAN
GER, INC.



Principal Place of Business

15162 NE 6TH AVE
NORTH MIAMI FL 33162

Mailing Address

15162 NE 6TH AVE
NORTH MIAMI FL 33162

2. Principal Place of Business

21 466 NE 137 ST
Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 641054
Suite, Apt. #, etc.

City & State

23 MIAMI, FLORIDA
Zip Country

City & State

28 MIAMI, Florida
Zip Country

24 33161

25 USA

29 33164

30 U.S.A.

9. Name and Address of Current Registered Agent

GABO, ERNST
15162 NE 6TH AVE
NORTH MIAMI FL 33162

3. Date Incorporated or Qualified

07/27/1995

3a. Date of Last Report

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

OSCAR BRYOL

82 Street Address (P.O. Box Number is Not Acceptable)

466 NE 137 ST

83

84 City

MIAMI

85 Zip Code

FL

33161

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 office or 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature]
Signature, typed or printed name of registered agent and title if applicable

SECRETARY OF ORGANIZATION

07-27-96
DATE

(NOTE: Registered Agent signature required when reinstating)

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS

TITLE SECRETARY OF ORGANIZATION ☐ DELETE
NAME OSCAR BRYOL "D"
STREET ADDRESS 466 NE 137 ST
CITY-ST-ZIP MIAMI, FL 33161

TITLE SECRETARY OF FORMATION ☐ DELETE
NAME JEAN MARIE ANGLADE ESNARY "D"
STREET ADDRESS 1041 NE 159TH STREET
CITY-ST-ZIP N. M. BCH, FL 33162

TITLE SECRETARY OF INFORMATION ☐ DELETE
NAME DANIEL CALIATE
STREET ADDRESS 2099 NE 172 STREET
CITY-ST-ZIP MIAMI, FL 33162

TITLE SECRETARY OF FINANCE ☐ DELETE
NAME KENNETH A. GOURGUE "T"
STREET ADDRESS 11218 SW. 154 TER
CITY-ST-ZIP MIAMI, FL 33157

TITLE ADVISOR ☐ DELETE
NAME NEVINSON ALCINDOR
STREET ADDRESS 3240 W 78 STREET
CITY-ST-ZIP MIAMI, FL 33162

TITLE GEN. SECRETARY ☒ DELETE
NAME ERNST GABO
STREET ADDRESS 1320 NW 184 TERRACE
CITY-ST-ZIP NORWOOD, FL 33169

13.

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

400001924994
-08/19/96--01005--043 ☐ Change ☐ Addition
***61.25

☐ Change ☒ Addition

ADVISOR
MAGALIE BENOIT
1950 NW 184 ST
MIAMI, FL 33156

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0008081

CR2E037 (3/96)