FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # N9700002698 (5)

FILED Mar 03 1998 8:00am Secretary of State

HAITIAN ASSOCIATION AGAINST CANCER, INC. Principal Place of Business Mailing Address												
HAITIAN ASSOCIATION AGAINST CANCER, INC.												
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Principal Place	e of Business	Mailing	Address				\dashv				H HH (01)	
							ļ.					
1001 NORTHEAST 125TH STREET 1001 NORTHEAST 125TH STREET SUITE 108							- 1	3. Date Incorporated or Qualified				
NORTH MIAMI FL 33161 NORTH MIAMI FL 33161								05/13/1997 4. FEI Number Applied For				
							Ì	65-0761586			lied For Applicable	
2. Principal P	lace of Business	2a. Mai	iling Address						807			
21		├ ─¬	26					5. Certificate of Status Desired \$8.75 Additional Fee Required				
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					6. Election Campaign Financing	\$5.0			
22		27					Trust Fund Contribution Added to Fees					
City & State	0	City	City & State					7. Is this nonprofit corporation a homeowners association?				
23		28		Cou				☐ Yes				
Zip	Country	·	Zip					B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24	9. Name and Address of Curr	29 ent Registere	d Agent	30				Personal Property Tax due June 30. 10. Name and Address of New Register		<u> </u>	NO	
					81	Name						
AMEDII A	WYER CHARTERED					-						
343 ALMERIA AVENUE				-	82	Street	Addres	s (P.O. Box Number is Not Acceptable)				
	SABLES FL 33134			Ì	83							
	a 2000 1 2 00 101				84	014				-		
				ļ	84	City		F	FL 85 ⁷	Zip C	ode	
11. Pursuant	to the provisions of Sections 617.0	502 and 617.1	508, Florida Statu	es, the at	oove	-named	corpora	ation submits this statement for the purpos i's board of directors. I hereby accept the	e of changir	ng Its	registered	
agent. I a	egistered agont, or both, in the six im familiar with, and accept the ob-	igations of, Se	ction 617.0503, Fi	orida Stat	utes	r me corp 3.	poration	is board or directors. Friereby accept the	appointmen	I MS TE	egistereu	
SIGNATURE												
12.	Signature, typed or printed name of registered			E: Registered	1 Age	nt signature	required v	when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS /		च्या	IN 12	
TITLE	OFFICERS AND DIRECTORS PD DELETE				1.1 TITLE			ADDITIONS/CHANGES TO OFFICERS /	Char		Addition	
NAME	CALIXTE, JACQUES A				1.2 NAME				C. 0/40	· go		
STREET ADDRESS	1001 NORTHEAST 125TH STREET				1.3 STREET ADDRESS							
CITY-ST-ZIP	NORTH MIAMI FL 33161	***************************************				1.4 CITY-ST-ZIP						
TITLE	VD DELETE				2.1 TITLE				Char	nge	Addition	
NAME	DESROULEAUX, JEAN			2.2 NA	AME		ļ					
STREET ADDRESS	1001 NORTHEAST 125TH S	TREET		2.3 \$1	REET	ADDRESS	ĺ					
CITY-ST-ZIP	NORTH MIAMI FL 33161				ITY-S	ST-ZIP	<u>. </u>					
TITLE	VD XX DELETE			3.1 T(TLE		VD		☐ Char	100	X Addition	
KAME	WYNN, EVELYN				ME		B	LOT, Rose P.				
STREET ADDRESS	1001 NORTHEAST 125TH STREET				3.3 STREET ADDRESS			1001 NE 125 Street, Suite 108 Miami, FL 33161				
CITY-ST-ZIP	NORTH MIAMI FL 33161 SD XX DELETE					ST-ZIP		iami, FL 33161	Char	-	K Addition	
TITLE	 -			4.1 10			SD	NGON 01	LJ Unar	Νu	אסטומטא ריש	
NAME OVERT ADDRESS	WYNN, MYRIAM J 1 1001 NORTHEAST 125TH S	TOCET		4.2 N		ADDDESS	100	NSON, Stanley E.				
STREET ADDRESS	NORTH MIAMI FL 33161	INCCI		4.3 81	met l	ALLUMESS 17ID	μυυ Mi⇒	1 NE 125 Street, St mi, FL 33161	mite 1	.08	5 1.	
CITY-ST-ZIP TITLE	TO MIXMI PL 33 TO 1			4.4 CITY-ST-ZIP 5.1 TITLE		1441	m= / En 33101	☐ Char	nge	☐ Addition		
NAME	EVEILLARD, PATRICK		_ ·	5.2 N						-		
STREET ADDRESS	1001 NORTHEAST 125TH S	TREET				ADDRESS	1					
CITY-ST-ZIP	NORTH MIAMI FL 33161			5.4 CI								
TITLE			DELETE	6.1 TI			1		Char	¥ Q 0	Addition	
NAME				6.2 NA	AME		1					
STREET ADDRESS				6.3 \$1	REET	ADDRESS						
CiTY-ST-7IP	l			64.00	TY-S	T- 7 IP	1					

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 acciver or trustee single wered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or order attachment with an appreciate the state of the corporation of the corporation or the acciver of the corporation of

Jacques-Albert Calixte 2/23/98