

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000004116

FILED
Apr 24, 2002 8:00 AM
Secretary of State

Entity Name: HAITIAN ALLIANCE FOR PROGRESS, INC.

Current Principal Place of Business:

1450 NE 151TH STREET
NORTH MIAMI, FL 33162

New Principal Place of Business:

Current Mailing Address:

1450 NE 151TH STREET
NORTH MIAMI, FL 33162

New Mailing Address:

FEI Number: 65-0798840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAINTVILLE, RENOLD
13180 NW 8TH AVENUE
NORTH MIAMI, FL 33168 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: SAINTVILLE, RENOLD
Address: 13180 NW 8TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: VD () Delete
Name: DUPerval, MARIO
Address: 1450 NE 151TH STREET
City-St-Zip: NORTH MIAMI, FL 33162

Title: VD () Delete
Name: JEAN-CHARLES, RENOLD
Address: 915 NW 30TH STREET
City-St-Zip: MIAMI, FL 33127

Title: SD () Delete
Name: ROSICLAIRE, MARIE-ANGE
Address: 1051 NW 141ST STREET
City-St-Zip: MIAMI, FL 33168

Title: TD () Delete
Name: VIELOT, EDWIDGE
Address: 18900 NE 3RD COURT #512
City-St-Zip: MIAMI, FL 33179

Title: ATD () Delete
Name: ST. JULIEN, JAQUELIN
Address: 1595 NE 140TH STREET
City-St-Zip: NORTH MIAMI, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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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 Section 119.07(3)(i), 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: RENOLD SAINTVILLE

PD

04/24/2002

Electronic Signature of Signing Officer or Director

Date