2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # N9900005347 May 24, 2000 8:00 am 1. Entity Name Secretary of State Haitian American Youth Organization 05-24-2000 90181 008 ****61.25 Principal Place of Business Mailing Address Miami, Florida 6420 S.W. 138th Ct Unit 103 Miami, Florida 33183 2. Principal Place of Business 3. . Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 05 - 044 1714 City & State City & State Applied For 65 - 0991919 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33183 Fee Required Dade 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Mireille Sylvain-David Street Address (P.O. Box Number is Not Acceptable) 6420 S.W. 138th Ct. Unit 103 Miami, FL 33183 Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Added to Fees FEE IS \$61.25 Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Director ☐ Defete TITLE Change Mireille Sylvain-David NAME NAME STREET ADDRESS STREET ADDRESS 6420 S. W. 138th Ct- 103 CITY-ST-ZIP CITY-ST-ZIP Miami, Florida 33183 ☐ Delete Associate Director Change ☐ Addition TITLE TITLE NAME NAME Luc Boisson Jr. STREET ADDRESS STREET, ADDRESS 6420 S. W. 138th_Ct CITY-ST-ZIP CITY-ST-ZIP Miami, FL 33183 ☐ Delete ☐ Change Addition Specialist of Savoir Faire NAME NAME Colette Brown STREET ADDRESS STREET ADDRESS 6420 S. W. 138th Ct. Miami, FL 33183 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Specialist Edication & Environment Change TITLE NAME NAME (Mr.) Jocelyn David STREET ADDRESS STREET ADDRESS 6420 S. W. 138th Ct. CITY-ST-ZIP CITY-ST-ZIP <u>Miami, FL 33183</u> Change ☐ Addition ☐ Delete TITLE Guidance Counselor NAME NAME Danielle Denis STREET ADDRESS STREET ADDRESS 6420 S. W. 138th Ct. - 145 CITY-ST-ZIP CITY-ST-7IP Delete TITLE Addition Mildred Cayard, Art Coordinator NAME 6420 S. 138th Ct. STREET ADDRESS STREET ADDRESS Miami, FL 33183 CITY-ST-ZIP I hereby certify that the information supplied with this filling does not qualify 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 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 Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE