

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000085131

FILED
May 01, 2006
Secretary of State

Entity Name: HAITIAN INDEPENDENCE FEST, INC

Current Principal Place of Business:

PO BOX 600365
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

PO BOX 600365
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 20-0132158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TECHNOLOGY & MANAGEMENT GROUP, INC
874 NE 125 ST
MIAMI, FL 33161 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FIRMIN, GERALD
Address: 7150 TYLER STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: VP () Delete
Name: CHEUVRY, RALPH
Address: 7150 TYLER STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: SEC () Delete
Name: FOURCAND, RICHARD
Address: 7150 TYLER STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: TRS (X) Delete
Name: DESAMOURS, ACHILLE
Address: 7150 TYLER STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: M (X) Delete
Name: JEROME, SONY
Address: 7150 TYLER STREET
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: ST-PREUX, LUDNEL
Address: PO BOX 600365
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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 Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUDNEL ST-PREUX

VP

05/01/2006

Electronic Signature of Signing Officer or Director

Date