

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000145568

FILED  
Jan 28, 2008  
Secretary of State

Entity Name: ASSOCIATION DE LA FRATERNITE, INC.

## Current Principal Place of Business:

4550 NW 41ST PLACE  
LAUDERDALE LAKES, FL 33319 US

## New Principal Place of Business:

## Current Mailing Address:

4550 NW 41ST PLACE  
LAUDERDALE LAKES, FL 33319 US

## New Mailing Address:

FEI Number: 59-3740589      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAINVIL, LOUINES  
4251 NW 5TH STREET  
APT. #42  
PLANTATION, FL, FL 33317 US 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: LOUINES SAINVIL

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: SAINVIL, LOUINES  
Address: 4251 NW 5TH STREET #42  
City-St-Zip: PLANTATION, FL 33317

Title: VP ( ) Delete  
Name: EXAVIER, ROBERT  
Address: 4000 NW 90TH WAY  
City-St-Zip: SUNRISE, FL 33351

Title: SEC ( ) Delete  
Name: BAPTISTE, ROSNEL  
Address: 4865 NW 6TH STREET  
City-St-Zip: PLANTATION, FL 33317

Title: SEC ( ) Delete  
Name: JEANESTAL, MARIE-ROSELINE  
Address: 2611 SW 9TH STREET #1  
City-St-Zip: FT LAUDERDALE, FL 33312

Title: TREA ( ) Delete  
Name: JEAN-CHARLES, IDONEL  
Address: 4550 NW 41ST PLACE  
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: TREA ( ) Delete  
Name: MOLTIMER, ECLESIASTE  
Address: 6307 NW 29TH COURT  
City-St-Zip: SUNRISE, FL 33313

## 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:

Title: ( ) Change ( ) Addition  
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 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: LOUINES SAINVIL

Electronic Signature of Signing Officer or Director

PRES

01/28/2008

Date