2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2006
Secretary of State

DOCUMENT# P05000098997

Entity Name: HAITI AIR EXPRESS, INC.

Current Principal Place of Business:

1550 NE 4TH AVENUE
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

5460 N STATE RD 7 SUITE #108
FORT LAUDERDALE, FL 33319

Current Mailing Address:

1550 NE 4TH AVENUE
FORT LAUDERDALE, FL 33304

New Mailing Address:

5460 N STATE RD 7 SUITE #108
FORT LAUDERDALE, FL 33319

FEI Number: 20-3149446 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JEAN-PHILIPPE, JULNER
1550 NE 4TH AVENUE
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

CAMILLE, STENIO
5460 N STATE RD 7
108
FORT LAUDERDALE, FL 33319 US

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: STENIO CAMILLE 07/25/2006
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: CEO ( ) Delete
Name: JEAN-PHILIPPE, JULNER
Address: 1550 NE 4TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: PRES (X) Delete
Name: CAMILLE, STENIO
Address: 1550 NE 4TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: VP (X) Delete
Name: AZEMAR, WISLANDE
Address: 1550 NE 4TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: CAMILLE, STENIO
Address: PO BOX 970545
City-St-Zip: COCONUT CREEK, FL 33097

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: STENIO CAMILLE PRES 07/25/2006
Electronic Signature of Signing Officer or Director Date