## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000117850

Entity Name: HAITI WEST AIRWAYS, INCORPORATED

FILED Jul 10, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	162 TERR KE PINES, FL(	33028			
Current Mailing Address:			New Mailing Address:		
2260 NW 162 TERR PEMBROKE PINES, FL 33028			C/O FICG 4344 LAKE LUCERNE CIR WPB, FL 33409		
FEI Number	: 20-3352258	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
PEMBRON The above in the State	e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI		ic Signature of Registered Ag	ent	 Date	
	ice with s. 607.193	8(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () CETOUTE, JEAI 2260 NW 162 T PEMBROKE PIN	ERR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () PIERRE-LOUIS, 925 NE 199 STF MIAMI, FL 3317	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () CETOUTE, JEAI 2260 NW 162 T PEMBROKE PII	ERR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () CETOUTE, JEAI 2260 NW 162 T PEMBROKE PII	ERR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TREA () VINCENT CETO	· ·	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: JEAN MICHEL CETOUTE P 07/10/2006

City-St-Zip:

PEMBROKE PINES, FL 33028