

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000083172

FILED
Apr 29, 2010
Secretary of State

Entity Name: HAITIAN FAMILY SERVICES,INC

Current Principal Place of Business:

2695 NORTH MILITARY TRAIL
SUITE 5
WEST PALM BEACH, FL 33403

New Principal Place of Business:

Current Mailing Address:

2695 NORTH MILITARY TRAIL
SUITE 5
WEST PALM BEACH, FL 33403

New Mailing Address:

FEI Number: 33-1173228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERRETTE, STANIA
129 PAR DRIVE
ROYAL PALM BEACH, FL 33411 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: BERRETTE, STANIA T
Address: 129 PAR DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VP
Name: TORCHON, DIEMS R
Address: 3398 COMMODORE CT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VP
Name: TORCHON, NYLIN D
Address: 3398 COMMODORE CT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: MBR
Name: TORCHON, FELIX
Address: 129 PAR DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

I hereby 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 all other like empowered.

SIGNATURE: STANIA BERRETTE

P

04/29/2010

Electronic Signature of Signing Officer or Director

Date