## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000029915

Entity Name: HAITIAN AMERICAN AGRO INDUSTRIES INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:			New Principal Pi	New Principal Place of Business:		
13072 SW MIAMI, FL	132 COURT 33186		13390 SW 131 ST UNIT 128 MIAMI, FL 33186			
Current N	lailing Addres	s:	New Mailing Add	New Mailing Address:		
13072 SW MIAMI, FL	132 COURT 33186		13390 SW 131 ST UNIT 128 MIAMI, FL 33186	FREET		
FEI Number	: 26-2275306	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )		
Name and	l Address of C	urrent Registered Agent:	Name and Addre	ess of New Registered Agent:		
UNIT 128 MIAMI, FL	131 STREET 33186 US	submite this statement for the	surpass of shanging its regis	stored office or registered agent or both		
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its regis	stered office or registered agent, or both,		
SIGNATUI						
	Electron	ic Signature of Registered Age	ent	Date		
Election Ca	mpaign Financing	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITIONS/CH#	ANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	PD () VALME, GEOR 3483 SW 52 AV PEMBROKE PA	/ENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VPD () MORISSET, MI 3170 AIRMANS FORT PIERCE,	DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	TD () ZAMOR, ETZEF 45 NE 104 STR MIAMI SHORES	EET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name:	ST () TURNIER, NOR		Title: Name:	( ) Change ( ) Addition		
Address: City-St-Zip:	13390 SW 131 MIAMI, FL 331		Address: City-St-Zip:			
	MIAMI, FL 331 D () TURNIER, FRAI	86 Delete NTZ STREET UNIT 128		()Change ()Addition		

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.

	Flataria Circatora of Circatora Office and Discatora		D-1-
SIGNATURE:	ETZER ZAMOR	TD	04/28/2009