

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P09000093966

**FILED**  
**Oct 23, 2010**  
**Secretary of State**

**Entity Name:** HAITI TOURISM DEVELOPMENT, INC.

**Current Principal Place of Business:**

5903 W BROWARD BLVD  
SUITE 134  
PLANTATION, FL 33317

**New Principal Place of Business:**

5309 W BROWARD BLVD  
SUITE 134  
PLANTATION, FL 33317

**Current Mailing Address:**

5903 W BROWARD BLVD  
SUITE 134  
PLANTATION, FL 33317

**New Mailing Address:**

5309 W BROWARD BLVD  
SUITE 134  
PLANTATION, FL 33317

**FEI Number:** 26-1180146

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ARMAND, JOHNNY  
5212 NW 15TH STREET  
MARGATE, FL 33063 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BELFORT, WILFRID  
Address: 1030 N.E. 180TH TERRACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: EXVP  
Name: ARMAND, JOHNNY  
Address: 5212 NW 15TH STREET  
City-St-Zip: MARGATE, FL 33063

Title: VP  
Name: THELUSMA, LEONCE  
Address: 133360 SW 91ST TERR., UNIT E  
City-St-Zip: MIAMI, FL 33386

Title: TREA  
Name: DOUZE, CLAUDE H DR  
Address: 1881 W. OAKLAND PARK BLVD  
City-St-Zip: OAKLAND PARK, FL 33311

Title: SECR  
Name: ROSE, STACY-ANN  
Address: 3930 SW 52ND AVENUE #1  
City-St-Zip: MIAMI, FL 33023

Title: ADV  
Name: MASSAC, MAX E ENG  
Address: 5190 NW 167TH STREET, SUITE 107  
City-St-Zip: MIAMI GARDENS, FL 33014

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: JOHNNY ARMAND

EXVP

10/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date