2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000055848

Entity Name: HAITI NORTH AMERICA DEVELOPMENT, INC

FILED Apr 30, 2011 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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607 NEW LAKE DRIVE 607 NEW LAKE DRIVE

BOYNTON BEACH, FL 33426 BOYNTON BEACH, FL 33426 UN

Current Mailing Address: New Mailing Address:

607 NEW LAKE DRIVE 607 NEW LAKE DRIVE

BOYNTON BEACH, FL 33426 UN

FEI Number: 80-0620828 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

DESHOMMES, CARINE 607 NEW LAKE DRIVE

BOYNTON BEACH, FL 33426 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: DESHOMMES, CARINE Address: 607 NEW LAKE DRIVE

City-St-Zip: BOYNTON BEACH, FL 33426 UN

Title:

Name: JONES, JAMILA Address: 243 KANSAS AVE

City-St-Zip: FORT LAUDERDALE, FL 33312 UN

Title: VP

Name: GASTON, JEAN ADLER Address: 607 NEW LAKE DRIVE

City-St-Zip: BOYNTON BEACH, FL 33426 UN

Title: [

Name: AUREL, PATRICIA Address: 607 NEW LAKE DRIVE

City-St-Zip: BOYNTON BEACH, FL 33426 UN

Title: 0

Name: JONES, KAMAL Address: 243 KANSAS AVE

City-St-Zip: FORT LAUDERDALE, FL 33312 UN

Title: O

Name: AUREL, MARIE F Address: 275 NORTH KANSAS AVE

City-St-Zip: FORT LAUDERDALE, FL 33312 UN

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: CARINE DESHOMMES P 04/30/2011