Miami-Dade My Home

SIGNATURE: _

2004 FOR PROFIT CORPORATION

1. Entity Name HAITIAN RELIGIOUS MINORITY PROJECTS INC. Principal Place of Business 717 NW 71 STREET MIAMI, FL 33150 Mailing Address 717 NW 71 STREET MIAMI, FL 33150 04012004 No Chg-P CR2E034 (10/03) Applied For	ANNUAL R	EPORT		_	Apr 30	0, 2004 08:00 A
DO NOT WRITE IN THIS SPACE A FILL Number A Confidence of Status Desired S8.75 Authorized Fee Neglected Agent S6.1026015 Next Applicable Fee Neglected Agent S8.75 Authorized Agent	1. Entity Name			Apr 30, 2004 08:00 A Secretary of State		
DO NOT WRITE IN THIS SPACE 4. FEI Number 65-1026015 Not Applicable 70-1026015 Not Applicable 70	717 NW 71 STREET	717 NW 71 STREET			å ivile relit vals ävst ex	(f malifet stricte kreans jijer psekia hafilbuk li führ
FORMAN, SAMUEL S 7553 ADVENTURE AVENUE NORTH BAY VILLAGE, FL 33141 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOWITI FEE IS \$160.00 After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE TITLE NAME STRETA NORIES CITY-ST-2P TITLE NAME SIRETA NORIES CITY-ST-2P TITLE NAME SIRETA NORIESS CITY-ST-2P TITLE			CE	04012004 4. FEI Numb 65-102	No Chg-P er :6015	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional
SIGNATURE Signature, typed of private faces of registered agent and 956 F applicable. (NOTE Registered Agent all planeurs received when reinstating) PILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ITILE NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS STREET	FORMAN, SAMUEL S 7553 ADVENTURE AVENUE	Stored Agent			-	
10. OFFICERS AND DIRECTORS TITLE NAME FORMAN, SAMUEL S 7653 ADVENTURE AVENUE NORTH BAY VILLAGE, FL 33141 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	the obligations of registered agent. SIGNATURE Signature, typed of printed name of registered agent and this	9. Election Campaign Final	nd Agent signature require	d when reinstaling)	UDODOO	04E
TITLE NAME STREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	CTORS				

Trial control of the control of the

BIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Page 2 of 2

FILED