## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000000894

Entity Name: AID INTERNATIONAL, INC.

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Current Principal Place of Business:

1299 SW KALEVALA DR. PORT ST LUCIE, FL 34953

**Current Mailing Address:** 

P.O BOX 220691

WEST PALM BEACH. FL 33422 US

FEI Number: 75-3085395 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ALIX, MARLAINE G 1299 SW KALEVALA DR PORT SAINT LUCIE, FL 34953 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

FILED Apr 30, 2013

**Secretary of State** 

CC5282208129

Officer/Director Detail:

Title PD Title STD

Name ALIX, MARLAINE G Name PIERRE, ERNST

Address 1299 SW KALEVALA DR Address 3902 SW COQUINA COVE WAY APT.

202

City-State-Zip: PORT SAINT LUCIE FL 34953

City-State-Zip: PALM CITY FL 34990

Title D Title
Name CELESTIN, MARQUELY

Name CELESTIN, MARQUELY

Name MEME, JEAN BAPTISTE

Address 5165 FOXWALL DR. N

Address 300 NW 135TH STREET

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: MIAMI FL 33168

Title VD

Name ALIX, RUTH VANESSA
Address 247 MATHER MAIL CENTER
City-State-Zip: CAMBRIDGE MA 02138

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIE MARLAINE GILLES ALIX PRESIDENT

Electronic Signature of Signing Officer/Director Detail

04/30/2013 Date