

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006060

FILED
Jun 30, 2020
Secretary of State
5446265260CC

Entity Name: THE HAITIAN AMERICAN LAW ENFORCEMENT OFFICERS ASSOCIATION, INC.

Current Principal Place of Business:

822 NE 125 STREET
SUITE 113
NORTH MIAMI, FL 33161

Current Mailing Address:

PO BOX 613843
MIAMI, FL 33261 US

FEI Number: 65-1141495

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAFONTANT, YVES SR.
822 NE 125 STREET
SUITE 113
NORTH MIAMI, FL 33161 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

Officer/Director Detail :

Title PRESIDENT, CEO
Name LAFONTANT, YVES SR
Address 822 NE 125 STREET
 SUITE 113
City-State-Zip: NORTH MIAMI FL 33161

Title EVP
Name LAFONTANT, REGINALD E.
Address PO BOX 613843
City-State-Zip: MIAMI FL 33261

Title T
Name LAFONTANT, YVES JR.
Address PO BOX 613843
City-State-Zip: MIAMI FL 33261

Title S
Name LAFONTANT, NATACHA
Address PO BOX 613843
City-State-Zip: MIAMI FL 33261

Title EVP
Name NOVACK, PAUL D
Address PO BOX 613843
City-State-Zip: MIAMI FL 33261

Title EVP
Name PIERRE, RICKY
Address PO BOX 613843
City-State-Zip: MIAMI FL 33261

Title EXECUTIVE SECRETARY
Name PIERRE, RICKY
Address 822 NE 125 STREET SUITE 113
City-State-Zip: MIAMI FL 33161

Title SECRETARY
Name PIERRE, CLOSEL
Address PO BOX 613843
City-State-Zip: MIAMI FL 33261

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: YVES LAFONTANT

PRESIDENT

06/30/2020

Electronic Signature of Signing Officer/Director Detail

Date