

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000003642

Entity Name: HELPING HANDS FOR HAITI, INC.**Current Principal Place of Business:**1350 S.W. 9TH STREET
NORTH LAUDERDALE, FL 33068**Current Mailing Address:**1350 S.W. 9TH STREET
NORTH LAUDERDALE, FL 33068 US**FEI Number:** 47-0970879**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PEARL, FELICIA A
5740 LAKESIDE DRIVE
313
MARGATE, FL 33063 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	P
Name	DESSAM, DONY D
Address	1350 S.W. 9TH STREET
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	T
Name	LOZIER, BERNARD
Address	7903 S.W. 9TH STREET
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	PASTOR
Name	WESNER , SERAPHIN
Address	7623 SW 22NT ST
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	VP
Name	FELIX, SMITH
Address	1350 S.W. 9TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33068

Title	S
Name	PIERRE-LOUIS, ADRIENNE
Address	4405 MILLICENT CIRCLE
City-State-Zip:	MELBOURNE FL 32901

Title	EXECUTIVE SECRETARY
Name	KETIANA , PROVINCE
Address	1234 SW 5TH CT
City-State-Zip:	POMPANO FL 33068

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: DONY DESSAM**PRESIDENT****03/01/2016**

Electronic Signature of Signing Officer/Director Detail

Date