

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000012206

**Entity Name:** HOLISTIC ACTION FOR THE TRANSFORMATION OF HAITI, INC.

**FILED**  
**Mar 02, 2024**  
**Secretary of State**  
**4236863145CC**

**Current Principal Place of Business:**

1615 SE 20TH PLACE  
HOMESTEAD, FL 33035

**Current Mailing Address:**

1615 SE 20TH PLACE  
HOMESTEAD, FL 33035

**FEI Number: 81-4186390**

**Certificate of Status Desired: No**

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

JEUDY, CLAUDE  
1615 SE 20TH PLACE  
HOMESTEAD, FL 33035 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: CLAUDE JEUDY**

**03/02/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P,D  
Name JEUDY, CLAUDE  
Address 1615 SE 20TH PLACE  
City-State-Zip: HOMESTEAD FL 33035

Title S,D  
Name JEUDY, TAHYNA  
Address 1615 SE 20TH PLACE  
City-State-Zip: HOMESTEAD FL 33035

Title D  
Name JOSEPH, HUGUES  
Address 1615 SE 20 PL  
City-State-Zip: HOMESTEAD FL 33035

Title ADVISOR  
Name PRINSTON, MARTINE ESQ.  
Address 1615 SE 20 PL  
City-State-Zip: HOMESTEAD, FL 33035

Title ADVISOR  
Name TAYLOR, DOUGLAS  
Address 1615 SE 20TH PLACE  
City-State-Zip: HOMESTEAD FL 33035

*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: CLAUDE JEUDY**

**PRESIDENT**

**03/02/2024**

Electronic Signature of Signing Officer/Director Detail

Date