

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750160

FILED
May 04, 2005
Secretary of State

Entity Name: HOPE MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

1490 BANKS RD
MARGATE, FL 33063 US

New Principal Place of Business:

Current Mailing Address:

1490 BANKS RD
MARGATE, FL 33063 US

New Mailing Address:

624 HOLLY SPRINGS RD
SUITE 333
HOLLY SPRINGS RD, FL 33063 US

FEI Number: 59-1981467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CIOFFI, VINCENT F
1490 BANKS RD
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

CIOFFI, VINCENT F
624 HOLLY SPRINGS RD
SUITE 333
HOLLY SPRINGS, FL 27540 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: VINCENT F CIOFFI

05/04/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CIOFFI, VINCENT F.,
Address: 3603 CYPRESS FERN WAY
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: SANTIAGO, MARTIN J
Address: 7915 W UPPER RIDGE DRIVE
City-St-Zip: PARKLAND, FL 33067

Title: D () Delete
Name: THOMAS, RICHARD
Address: 10091 NW 39TH CT
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CIOFFI, VINCENT F.,
Address: 624 HOLLY SPRINGS RD SUITE 333
City-St-Zip: HOLLY SPRINGS, NC 27540

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VINCENT F CIOFFI

D

05/04/2005

Electronic Signature of Signing Officer or Director

Date