2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766650

1. Entity Name

FAITH - HOPE - LOVE FOUND	JATION, INC.
Principal Place of Business	Mailing Address
2301 N.W. 95TH STREET MIAMI FL 33147	2301 N.W. 95TH STREET MIAMI FL 33147-2415
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

Aug 17, 2000 8:00 am Secretary of State 08-17-2000 90099 047 ****70.00

*UU/JIJ4



2. Principal P	Place of Business 3. Mailing Address												
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE							
City & State	9	City	City & State			4. FEI 1	FEI Number 59-2527884				pplied For ot Applicable		
Zip	Country	Zip	Zip Country				ificate of Status	\$8.75 Ad Fee Require					
<u>_</u>		7. Name and Address of New Registered Agent											
					Name								
COBB, ERNEST				Street	Street Address (P.O. Box Number is Not Acceptable)								
				Otrees	Office Madridge (1.0), Dox Hamber is 1901 Acceptable)								
	151 TERRACE												
OPA LOCI	(A FL 33054			City	City Zip Code								
				J City					FL	2.000			
8. The above	8. 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.												
	er the depresentation of the particular of the particular of the particular and the parti												
SIGNATURE													
	Signature, typed or printed name	of registered agent and title if appli	cable. (NOTE:	Registered Agent sig	nature required w	vnen reinstat	ung)		DATE				
	,												
	FILE NOW:		Election Campaign							neck Payable to			
FEE IS \$61.25 Trust Fund Contribution.				tion. \square	☐ Added to Fees Department of Star						•		
40	OCCIV	ERS AND DIRECTORS	"	11.		DDITION	S ICHANGES	TO OFFICERS	AND DIE	DECTORS II	VI 10		
10.		ERS AND DIRECTORS	Прин	1		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Treasurer ☑ Change ☑ Additi							
TITLE	PD FIVE		☐ Delete	TITLE NAMÉ	1110	rreasurer				Change	☐ Addition §		
NAME STREET ADDRESS	YOUNG, ELVA	:CT		STREET ADDRES	s You	ıng,	Elva				1		
CITY-ST-ZIP	2301 NW 95TH STRE	EI		CITY-ST-ZIP	230	01 NW 95th Street, Miami							
	MIAMI FL VD		☐ Delete	TITLE	Pres	Descridose					Addition C		
TITLE NAME	ALBURY, JAMES H.	•	. Delete	NAME	Albu	Albury, James H.				OK Onange	Addition		
STREET ADDRESS.	2301 NW-95TH ST.		•	STREET ADDRES		2301 NW 95th Street							
CITY-ST-ZIP	MIAMI FL		•	CITY-ST-ZIP			FL 331			,			
TITLE	STD		☐ Delete	TITLE	Secr					☐ Channe	XX Addition		
NAME	ALBURY, BARRY TY	RONE	□ Detete	NAME		Grant, Zeronie N.							
STREET ADDRESS	41 W. 112TH STREE			STREET ADDRES		8430 East Dixie Highway							
CITY-ST-ZIP	NEW YORK NY	•		CITY-ST-ZIP		Miami, FL 33138							
TITLE	D		☐ Delete	TITLE	מ			•		☐ Change	₹ Addition		
NAME	COBB. ERNEST			NAME	Albu	ıry-E	Hunter,	Resa	Ann	_ ,	_		
STREET ADDRESS	7781 NW 192 ST			STREET ADDRE	48	Nort	h Ayen	ine					
CITY-ST-ZIP	MIAMI FL			CITY-ST-ZIP		Greenwood, NC							
TITLE	2 C C C C C C C C C C C C C C C C C C C		☐ Delete	TITLE			, , ,,,,			☐ Change	☐ Addition		
NAME				NAME						2			
STREET ADDRESS				STREET ADDRES	s								
CITY-ST-ZIP			•	CITY-ST-ZIP							ļ		
TITLE			☐ Defete	TITLE						☐ Change	☐ Addition		
NAME				NAME									
STREET ADDRESS				STREET ADDRES	S								
CITY-ST-ZIP				CITY-ST-ZIP									

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: