2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Sep 05, 2006 8:00 am Secretary of State

DOCUMENT # L05000099165 1. Entity Name HOPE & FAITH, LLC							0051 014 ****50	0.00
Principal Place	of Business	Mailing Address	iling Address			4010278	7	
155 N HARBOR DR #3110 CHICAGO, IL 60601 FL		155 N HARBOR DR #3110 Chicago, Il 60601 FL						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		08312006	Chg-LLC	CR2E083 (11/05)		
City & State		City & State		4. FEI Numb	"20-3600	194 A	pplied For ot Applicable	
Zip	Country	Zip Country		ry		of Status Desired	\$5.00 Ad	
	6. Name and Address of Current F	tegistered Agent			7. Name and	Address of New Re		
HOFFMAN, LEVY, BENGIO & CO. PL)	Name				
2525 N ST HOLLYWO	-		Street Address	s (P.O. Box Number is Not Acceptable)				
			į					
			1	City	FL Zip Code			
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	egistere	d office or registe	red agent, or bo	oth, in the State of Flor	rida. I am familiar with	, and accept
SIGNATURE.	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered	Agent signature require	d when reinstating)		DATE	
Fil Due t	ing Fee is \$50.00 by September 6, 2006				Make check payable to Florida Department of State			
9.	MANAGING MEMBEI	RS/MANAGERS	10.			ADDITIONS/	CHANGES	
TITLE	MGR	☐ Delete	TITLE				☐ Change	Addition
NAME STREET ADDRESS	PIERRE-LOUIS, SERGE J 155 N HARBOR DR #3110	•	NAME	ET ADDRESS				
CITY-ST-ZIP	CHICAGO, IL 60601			ST-ZIP				
TITLE	MGRM	☐ Delete TITL					☐ Change	Addition
NAME	BEAUVOIR, JERMAINE	· ·		l				
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP				
TITLE			TITLE		.,		Change	Addition
NAME	DIEDDE LOUIS CEDADO			. 1			,.	_
	PIERRE-LOUIS, GERARD		NAME	•				
STREET ADDRESS	155 N HARBOR DR #3110		STREE	ET ADDRESS				
CITY-ST-ZIP	155 N HARBOR DR #3110 CHICAGO, IL 60601	□ Delete	STREI CITY-	ET ADDRESS ST-ZIP			□ Channe	Addition
	155 N HARBOR DR #3110	☐ Delete	STREE	ET ADDRESS ST-ZIP			☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	155 N HARBOR DR #3110 CHICAGO, IL 60601 MGRM GUILLAUME, VALERIO 155 N HARBOR DR #3110	☐ Delete	STREI CITY- TITLE NAME STREI	ET ADDRESS ET ADDRESS ET ADDRESS			☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	155 N HARBOR DR #3110 CHICAGO, IL 60601 MGRM GUILLAUME, VALERIO		STREI CITY- TITLE NAME STREI CITY-	ET ADDRESS ET ADDRESS ST-ZIP				
CITY-ST-ZIP TITLE NAME STREET ADDRESS	155 N HARBOR DR #3110 CHICAGO, IL 60601 MGRM GUILLAUME, VALERIO 155 N HARBOR DR #3110	☐ Delete	STREI CITY- TITLE NAME STREI	ET ADDRESS -S1-ZIP E ET ADDRESS -S1-ZIP			☐ Change	Addition
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CITY-SI-ZIP TITLE NAME STHEET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	155 N HARBOR DR #3110 CHICAGO, IL 60601 MGRM GUILLAUME, VALERIO 155 N HARBOR DR #3110	☐ Delate	STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY-	ET ADDRESS S1-ZIP E ET ADDRESS ST-ZIP E ET ADDRESS -ST-ZIP			☐ Change	☐ Addition
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CITY-SI-ZIP TITLE NAME STHEET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	155 N HARBOR DR #3110 CHICAGO, IL 60601 MGRM GUILLAUME, VALERIO 155 N HARBOR DR #3110	☐ Delate	STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME NAME NAME	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP			☐ Change	☐ Addition
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I nerecy certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NUMBER AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

8/31/06

(312) 420.0144