

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000451

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** HAVEN OF HOPE MIAMI, INCORPORATED

**Current Principal Place of Business:**

2535 NW 118 ST  
MIAMI, FL 33167

**New Principal Place of Business:**

**Current Mailing Address:**

2610 NW 119 STREET  
MIAMI, FL 33167

**New Mailing Address:**

**FEI Number:** 65-0982655

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUTHRIE, ALBERT  
6004 NW 201 TERRACE  
HIALEAH, FL 33015 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GUTHRIE, SONIA  
Address: 6004 NW 201 TERRACE  
City-St-Zip: HIALEAH, FL 33015

Title: VPD ( ) Delete  
Name: HENRY, PANSY  
Address: 9740 ATLANTIC DRIVE  
City-St-Zip: MIRAMAR, FL 33025

Title: STD ( ) Delete  
Name: PEART, LYNETTE  
Address: 20009 NW 66 PLACE  
City-St-Zip: HIALEAH, FL 33015

Title: D ( ) Delete  
Name: GUTHRIE, ALBERT  
Address: 6004 NW 201 TERR.  
City-St-Zip: HIALEAH, FL 33015

Title: D ( ) Delete  
Name: KNOWLES, LIVINGSTONE  
Address: 8925 NE 9TH COURT  
City-St-Zip: MIAMI SHORES, FL 33138

Title: D ( ) Delete  
Name: PEART, GUY  
Address: 20009 NW 66 PLACE  
City-St-Zip: HIALEAH, FL 33015

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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 Chapter 119, 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: ALBERT GUTHRIE

REV.

04/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date