

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000006393

FILED  
Jul 22, 2002  
Secretary of State

Entity Name: HOPE FOR HAITI'S CHILDREN INC.

**Current Principal Place of Business:**

16477 SW 100TH TERRACE  
MIAMI, FL 33196

**New Principal Place of Business:**

**Current Mailing Address:**

16477 SW 100TH TERRACE  
MIAMI, FL 33196

**New Mailing Address:**

FEI Number: 65-1040282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KHAWLY, CYNTHIA  
16477 SW 100TH TERRACE  
MIAMI, FL 33196

**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: D ( ) Delete  
Name: KHAWLY, CYNTHIA  
Address: 16477 SW 100TH TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete  
Name: KHAWLY, PATRICE  
Address: 16477 SW 100TH TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete  
Name: CASIMIR, YVETTE  
Address: 16477 SW 100TH TERRACE  
City-St-Zip: MIAMI, FL 33196

**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:

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: CYNTHIA KAWLY

D

07/22/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date