


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 07, 2008 8:00 am**  
**Secretary of State**

05-07-2008 90108 040 \*\*\*\*70.00

<b>DOCUMENT # N00000006393</b> 1. Entity Name HOPE FOR HAITI'S CHILDREN INC.					
Principal Place of Business 474 FOREST LAKES DR. STERRETT, AL 35147			Mailing Address 474 FOREST LAKES DR. STERRETT, AL 35147		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		02272008    Chg-NP    CR2E037 (12/06)	
Zip		Country		4. FEI Number 65-1040282	
City & State		City & State		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>				<b>7. Name and Address of New Registered Agent</b>	
KHAWLY, CYNTHIA 16477 SW 100TH TERRACE MIAMI, FL 33196				Name Street Address (P.O. Box Number is Not Acceptable) City FL    Zip Code	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KHAWLY, CYNTHIA 16477 SW 100TH TERRACE MIAMI, FL 33196		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KHAWLY, PATRICE 16477 SW 100TH TERRACE MIAMI, FL 33196		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASIMIR, YVETTE 16477 SW 100TH TERRACE MIAMI, FL 33196		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 		<input type="checkbox"/> Delete		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b> <i>Cynthia Khawly</i>			5-3-2008    786-897-6141		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date    Daytime Phone #</small>		

ATTACHMENT  
40098711  
#N000000006393

May 3, 2008

Hope For Haiti's Children Inc.  
474 Forest Lakes Dr  
Sterrett AL 35147  
786-897-6141

Att: Division Of Corporations

I'm Sorry I didn't send my payment on time I was in Haiti doing missionary work and I was delayed over there. I just came back and I'm sending my payment.

Thank you and God bless you

Cynthia Khawly

