

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001161

FILED
Apr 20, 2011
Secretary of State

Entity Name: MELISSA'S HOPE FOUNDATION, INC.

Current Principal Place of Business:

8955 NW 112TH TERR.
HIALEAH GARDENS, FL 33018

New Principal Place of Business:

Current Mailing Address:

8955 NW 112TH TERR.
HIALEAH GARDENS, FL 33018

New Mailing Address:

FEI Number: 65-1119817 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LOPEZ, MARLENE
8955 NW 112TH TERR.
HIALEAH GARDENS, FL 33018 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: O
Name: CLAVIJO, ODALYS
Address: 365 W. 50 STREET
City-St-Zip: HIALEAH, FL 33012

Title: D
Name: LOPEZ, LAZARO
Address: 222 EAST 36 STREET
City-St-Zip: HIALEAH, FL 33013

Title: O
Name: RIOL, MARIA
Address: 365 W. 50TH ST.
City-St-Zip: HIALEAH, FL 33012

Title: D
Name: LOPEZ, MARLENE
Address: 8955 NW 112 TERRACE
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: O
Name: LOPEZ, MICHELLE M
Address: 8955 N.W. 112 TERRACE
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: O
Name: LOPEZ, BARBARA
Address: 10045 S.W. 53 STREET
City-St-Zip: MIAMI, FL 33165

I hereby 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 all other like empowered.

SIGNATURE: MARLENE LOPEZ

DIRE

04/20/2011

Electronic Signature of Signing Officer or Director

Date