

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000002191

FILED
Apr 14, 2002 8:00 AM
Secretary of State

Entity Name: ISLANDS OF HOPE, INC.

Current Principal Place of Business:

4629 POINCIANA STREET, #518
LAUDERDALE BY THE SEA, FL 33308

New Principal Place of Business:

Current Mailing Address:

4629 POINCIANA STREET, #518
LAUDERDALE BY THE SEA, FL 33308

New Mailing Address:

FEI Number: 65-1084742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADDOX, RUTH MCGEE
4629 POINCIANA STREET, #518
LAUDERDALE BY THE SEA, FL 33308

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: PD () Delete
Name: MADDOX, CHRIS
Address: 4629 POINCIANA STREET, #518
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: D () Delete
Name: MADDOX, RUTH
Address: 4629 POINCIANA STREET, #518
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: D () Delete
Name: ESCOBAR, NOEL
Address: 4420 S.W. 77TH AVENUE
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: KYRIAKOPOULOS, NICK A
Address: 12164 N W 34TH STREET
City-St-Zip: SUNRISE, FL 33323

Title: D () Delete
Name: TOLEDO, EDWIN
Address: 7842 N.W. 1ST COURT
City-St-Zip: MARGATE, FL 33063

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:

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: CHRIS MADDOX

PD

04/14/2002

Electronic Signature of Signing Officer or Director

Date