2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004663

Entity Name: ROAD TO HOPE, INC.

FILED May 05, 2004 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
11115 SW MIAMI, FL					
Current Mailing Address:			New Mailing Address:		
11115 SW MIAMI, FL					
FEI Number	: 65-1127321	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
FABIO, DE 11115 SW MIAMI, FL	134 CT				
	named entity s e of Florida.	submits this statement for the pu	urpose of changing it	ts registered office or registered agent, or both,	
SIGNATU					
	Electron	ic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () FABIO, DEBRA 7231 S W 130T MIAMI, FL 3318		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () DE LANDRO, N 709 E 96TH STI BROOKLYN, N	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () SAMUEL, BREN 1140 E 86TH S' BROOKLYN, N	reet	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () CLAPPROTON, 1581 FLAMING HOMESTEAD, F	ост	Title: Name: Address: City-St-Zip:	D (X) Change () Addition FABIO, HERBERT 11115 SW 134TH COURT MIAMI, FL 33186	
Title: Name: Address: City-St-Zip:	D () PETERS, LUTH 10487 SW 216 MIAMI, FL 331	TH STREET	Title: Name: Address: City-St-Zip:	()Change()Addition	

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: HERBERT FABIO D 05/05/2004