## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000004915

FILED Aug 26, 2009 Secretary of State

Entity Name: HOPE FOR KIDS, INC., BUILDING A FUTURE

Current Principal Place of Business:		New Principal Place of Business:	
	CKELL AVE APT 206 . 331292495		
Current N	Mailing Address:	New Mailing A	ddress:
	CKELL AVE APT 206 . 331292495		
	r: 65-1141300 FEI Number Applied For() FE nce with s. 607.193(2)(b), F.S., the corporation did not rece	El Number Not Applicable eive the prior notice.	( ) Certificate of Status Desired (X)
Name and	d Address of Current Registered Agent:	Name and Add	ress of New Registered Agent:
	CARMEN RAL WAY, STE 106 . 33145 US		
	e named entity submits this statement for the purpo te of Florida.	ose of changing its reg	gistered office or registered agent, or both,
SIGNATU	RE:		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () Delete CANAHUATI, MARIO 2333 BRICKELL AVE APT 206 MIAMI, FL 331292495	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	V () Delete LASTRA, CARLOS 7480 NW 52ND ST., STE. C MIAMI, FL 33166	Title: Name: Address: City-St-Zip:	()Change ()Addition
	S () Delete	Title:	( ) Change ( ) Addition
Name: Address:	MOLINA, JOSE ZIP CHOLOMA, CARRETERA A PUERTO CORTES CHOLOMA HONDURAS, OC	Name: Address: City-St-Zip:	
Name: Address: City-St-Zip: Title: Name: Address:	MOLINA, JOSÉ ZIP CHOLOMA, CARRETERA A PUERTO CORTES	Name: Address:	()Change ()Addition
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	MOLINA, JOSÉ ZIP CHOLOMA, CARRETERA A PUERTO CORTES CHOLOMA HONDURAS, OC  AS () Delete ALBIR, RODRIGO KM 12 CARRETERA A PTO CORTES	Name: Address: City-St-Zip: Title: Name: Address:	()Change ()Addition ()Change ()Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MARIO CANAHUATI PRES 08/26/2009