

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002788

Entity Name: H O T C INSTITUTE, INC.

FILED
Mar 21, 2009
Secretary of State

Current Principal Place of Business:

18441 NW 2ND AVENUE
SUITE 300
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

18441 NW 2ND AVE
SUITE 300
MIAMI, FL 33169

New Mailing Address:

18441 NW 2ND AVENUE
SUITE 300
MIAMI, FL 33169

FEI Number: 01-0677103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, CAROL
18441 NW 2ND AVE
SUITE 300
MIAMI, FL 33169 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: D () Delete
Name: BARROW, KERRY
Address: 8210 CLEARY BLVD., APT 2104
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: SAUNDERS, KEN-EARL
Address: 5633 N W 106TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D () Delete
Name: THREAT, BRENDA
Address: 11531 SW 109 RD #42
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SOPHIA, HAROLD
Address: 18441 NW 2ND AVENUE
City-St-Zip: MIAMI, FL 33169

Title: D (X) Change () Addition
Name: EWART, GAYLE
Address: 18441 NW 2ND AVENUE
City-St-Zip: MIAMI, FL 33169

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CB

D

03/21/2009

Electronic Signature of Signing Officer or Director

Date