## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N02000005591

Entity Name: HOPE AND LIFE HISPANIC CENTER, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
4049 WINC	HESTER LN CH, FL 33406			,	
Current Mailing Address:			New Mailir	New Mailing Address:	
	HESTER LN CH, FL 33406				
FEI Number:	35-2176462	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Age				Address of New Registered Agent:	
BOCA RAT	DERAL HWY S ON, FL 33431	US	pose of changing it	s registered office or registered agent, or both,	
in the State	of Florida.	·			
SIGNATURE:					
Electronic Signature of Registered Agent				Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () E FLORES, MIGUE 4049 WINCHEST W PALM BCH, FI	ER LN	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () E SHEARIN, NORM 6515 NW 43RD T BOCA RATON, F	ERR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () E SHEARIN, ROBE 4400 N FEDERAL BOCA RATON, F	HWY STE 210	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition SHEARIN, ROBERT L 4400 N FEDERAL HWY STE 210 BOCA RATON, FL 33431	
Title: Name: Address: City-St-Zip:	TD () E MALDONADO, W 2800 PALMWOO BOCA RATON, F	D TERR P-120	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	SD ( ) Change (X) Addition CARRASQUILLO, BETTY 122 PINE CIRCLE GREENACRES, FL 33446	
Title: Name: Address: City-St-Zip:	( ) [	Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition ORLANDO CARRASQUILLO, ORLANDO 122 PINE CIRCLE GREENACRES, FL 33446	

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: ROBERT L. SHEARIN D 04/30/2003

MIGUEL VASQUEZ 2390 S. MILITARY TRAIL WEST PALM BEACH, FL 33415

CHARLES MARTINEZ 1091 E. SHORE DRIVE WEST PALM BEACH, FL 33406