

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001576

FILED
Apr 29, 2005
Secretary of State

Entity Name: HOPE FOR THE COMMUNITY, INC.

Current Principal Place of Business:

310 E 5TH STREET
HIALEAH, FL 33010

New Principal Place of Business:

1750 W 8 AVE
HIALEAH, FL 33012

Current Mailing Address:

310 E 5TH STREET
HIALEAH, FL 33010

New Mailing Address:

1750 W 8 AVE
HIALEAH, FL 33012

FEI Number: 06-1679098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SANTIESTEBAN, OBED
1675 W 59 ST
HIALEAH, FL 33012 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: PD () Delete
Name: SANTIESTEBAN, OBED
Address: 1675 W 59 ST
City-St-Zip: HIALEAH, FL 33012

Title: SD () Delete
Name: SANTIESTEBAN, NORA
Address: 971 W. 64 PL
City-St-Zip: HIALEAH, FL 33012

Title: TD () Delete
Name: ALVAREZ, EMILIO
Address: 6035 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: VPD () Delete
Name: SANTIESTEBAN, MELQUIADES
Address: 971 W 64 PL
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Delete
Name: GONZALEZ, ERVIN
Address: 680 E 62 ST
City-St-Zip: HIALEAH, FL 33013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: NUNEZ, STUART
Address: 1750 W 8 AVE
City-St-Zip: HIALEAH, FL 33012

Title: TD (X) Change () Addition
Name: ZAYAS, DANIEL
Address: 1750 W 8 AVE
City-St-Zip: HIALEAH, FL 33012

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: OBED SANTIESTEBAN

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date