

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001576

FILED  
Jun 13, 2006  
Secretary of State

**Entity Name:** HOPE FOR THE COMMUNITY, INC.

**Current Principal Place of Business:**

1750 W 8 AVE  
HIALEAH, FL 33012

**New Principal Place of Business:**

326 EAST 5 ST  
HIALEAH, FL 33010

**Current Mailing Address:**

1750 W 8 AVE  
HIALEAH, FL 33012

**New Mailing Address:**

326 EAST 5 ST  
HIALEAH, FL 33010

**FEI Number:** 06-1679098      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**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: NUNEZ, STUART  
Address: 1750 W 8 AVE  
City-St-Zip: HIALEAH, FL 33012

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: SD (X) Change ( ) Addition  
Name: NUNEZ, STUART  
Address: 326 EAST 5 ST  
City-St-Zip: HIALEAH, FL 33010

Title: TD (X) Change ( ) Addition  
Name: ZAYAS, DANIEL  
Address: 326 EAST 5 ST  
City-St-Zip: HIALEAH, FL 33010

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 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: OBED SANTIESTEBAN

PD

06/13/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date