2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# N03000006917

Entity Name: HOPE FOR THE POOR INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

953 MERCY DRIVE
SUITE E
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

150 NW 42ND WAY
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 03-0435425 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PLAISE, JULIENNE
899 BLOOMINGTON CT
OCOEE, FL 34761 US

Name and Address of New Registered Agent:

PLAISE, JULIENNE
1365 WEST POINT VILLA BLVD
WINTER GARDEN, FL 34787 US

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: JULIENNE PLAISE 04/23/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PLAISE, JULIENNE
Address: 899 BLOOMINGTON CT
City-St-Zip: OCOEE, FL 34761

Title: S ( ) Delete
Name: SEARS, CINDY
Address: 730 WEBB DR NE
City-St-Zip: LIVE OAK, FL 32064

Title: T ( ) Delete
Name: LOUIS, PAULINA
Address: 3546 N LAKEMANN DR
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PLAISE, JULIENNE
Address: 1365 WEST POINT VILLA BLVD.
City-St-Zip: WINTER GARDEN, FL 34767

Title: S (X) Change ( ) Addition
Name: GEORGES, RAYMOND
Address: 1365 WEST POINT VILLA BLVD
City-St-Zip: WINTER GAEDEN, FL 34767

Title: T (X) Change ( ) Addition
Name: FRANTZ, BELIZAIRE
Address: 2830 NE 8TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

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: JULIENNE PLAISE D 04/23/2007
Electronic Signature of Signing Officer or Director Date