

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010285

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** OUR FATHER'S HOUSE FOR CHILDREN, CORP.

**Current Principal Place of Business:**

16219 NW 84TH AVE.  
MIAMI, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

16219 NW 84TH AVE.  
MIAMI, FL 33016

**New Mailing Address:**

**FEI Number:** 22-3904320

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COSTA, SILVIA  
16219 NW 84TH AVE.  
MIAMI, FL 33016 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  
Name: COSTA, SILVIA  
Address: 16219 NW 84TH AVENUE  
City-St-Zip: MIAMI LAKES, FL 33016

Title: VD  
Name: COSTA, KARINA  
Address: 201 RACQUET CLUB RD., #N-220  
City-St-Zip: WESTON, FL 33326

Title: VD  
Name: COSTA, JOSE  
Address: 201 RACQUET CLUB RD., #N-220  
City-St-Zip: WESTON, FL 33326

Title: D  
Name: HERNANDEZ, EDILIA L  
Address: 16216 NW 84TH AVE.  
City-St-Zip: MIAMI, FL 33016

Title: SD  
Name: GUERRERO, CARLA  
Address: 20573 SW 1ST ST.  
City-St-Zip: PEMBROKE PINES, FL 33029

I hereby 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 all other like empowered.

SIGNATURE: SILVIA COSTA

PD

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date