2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011038

17331 NW 9TH PLACE

MIAMI, FL 33169

Address:

City-St-Zip:

FILED Apr 12, 2006 Secretary of State

Entity Name: A PLACE OF HOPE - MIAMI, INC. **Current Principal Place of Business: New Principal Place of Business:** 1990 ALI BABA AVENUE OPA LOCKA, FL 33054 **Current Mailing Address: New Mailing Address:** 1990 ALI BABA AVENUE OPA LOCKA, FL 33054 FEI Number: 56-2475518 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PATTERSON, FRANK 2972 NW 56TH STREET MIAMI, FL 33142 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PATTERSON, FRANK Name: Name: Address: 1990 ALI BABA AVENUE Address: City-St-Zip: OPA LOCKA, FL 33054 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BROWN, REGINALD Name: Address: 15770 NW 18TH PLACE Address: City-St-Zip: OPA LOCKA, FL 33054 City-St-Zip: Title: () Delete Title: () Change () Addition RIVERS, ORA Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: FRANK PATTERSON PD 04/12/2006