2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2008
Secretary of State

DOCUMENT# N05000001241

Entity Name: HOPE ACADEMY, INC.

Current Principal Place of Business:

10875 SW QUILL ROOST DR
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

9990 SW 77 AVE
SUITE 330
MIAMI, FL 33156

New Mailing Address:

10875 SW QUILL ROOST DR
MIAMI, FL 33157

FEI Number: 20-4565103 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

MARGOLIS, JOHN A
SUITE 330 9990 SW 77TH AVE
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

MARGOLIS, JENNIFER A ESQ.
1533 SUNSET DRIVE
SUITE 225
CORAL GABLES, FL 33143 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: JENIFER A. MARGOLIS 05/13/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PERSAUD, CECIL R
Address: 10875 SW QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: RAMNAUTH, BAUL
Address: 10875 SW QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL 33157

Title: VP ( ) Delete
Name: PERSUAD, INDRANIE
Address: 10875 SW QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL 33157

Title: T ( ) Delete
Name: AUTAR, NIRVALA
Address: 10875 SW QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: SINGH, EDDIE
Address: 10875 SW QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: VEVICANAND, RAMNAUTH
Address: 10875 SW QUAIL ROOST DR
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: CECIL R. PERSAUD D 05/13/2008
Electronic Signature of Signing Officer or Director Date