## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N05000010187

FILED Mar 10, 2008 Secretary of State

Entity Name: HOPE FOR THE HOMELESS/ HOPELESS, INC.

**Current Principal Place of Business:** New Principal Place of Business:

6825 NW 15 AVE. 1621 N.W. 60 STREET

MIAMI, FL 33147 SUITE 8 US MIAMI, FL 33142

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 013831 6825 NW 15 AVE

MIAMI, FL 33147 US MIAMI, FL 33101 US

FEI Number: 57-1230463 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: Name and Address of New Registered Agent:

MACIAS, PATRICIA MACIAS, PATRICIA 4055 NW 17 AVE 1621 N.W. 60 STREET US MIAMI, FL 33142 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: PATRICIA MACIAS 03/10/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DIR (X) Change ( ) Addition () Delete

GRATE, LACANDISE GRATE, LACANDISE Name: Name: 6825 NW 15 AVE Address: 1621 N.W. 60 STREET SUITE 8 Address:

City-St-Zip: MIAMI, FL 33147 US City-St-Zip: MIAMI, FL 33142 US

Title: DIR Title: **PRES** (X) Change ( ) Addition ( ) Delete MACIAS, PATRICIA Name: MACIAS, PATRICIA Name: Address: 6825 NW 15 AVE. Address: 1621 N.W. 60 STREET

City-St-Zip: MIAMI, FL 33147 US City-St-Zip: MIAMI, FL 33142 US

Title: DIR () Delete Title: **TRES** (X) Change ( ) Addition

SPENCE, TIFFANY SPENCE, TIFFANY Name: Name: Address: 6825 NW 15 AVE. Address:

1621 N.W. 60 STREET SUITE 8

City-St-Zip: MIAMI, FL 33147 US City-St-Zip: MIAMI, FL 33142 US

Title: Title: DIR ( ) Change (X) Addition ( ) Delete

Name: Name: SAMANTHS, MACIAS 1621 N.W. 60 STREET SUITE 8 Address: Address:

City-St-Zip: City-St-Zip: MIAMI, FL 333142

Title: () Delete Title: VIC ( ) Change (X) Addition

JUANITA SHANKS, Name: Name:

1621 N. W. 60 STREET SUITE 8 Address: Address:

City-St-Zip: City-St-Zip: MMIAMI, FL 33142 US

Title: () Delete Title: ( ) Change (X) Addition STEPHEN, TAYLOR Name: Name:

Address: Address: 1621 N.W. 60 STREET SUITE 8

MIAMI, FL 33142 City-St-Zip: 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: PATRICIA MACIAS **PRES** 03/10/2008

Electronic Signature of Signing Officer or Director

Date