2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010346

FILED Jul 02, 2008 Secretary of State

Entity Name: PEARLS OF HOPE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 14651 SOUTHWEST 99TH COURT MIAMI, FL 33176 **Current Mailing Address: New Mailing Address:** 14651 SOUTHWEST 99TH COURT MIAMI, FL 33176 FFI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X) 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: HAMLER, ELSIE K 14651 SOUTHWEST 99TH COURT MIAMI, FL 33176 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 CLARINGTON, MABLE Name: Name: Address: 11701 SOUTHWEST 193RD ST Address: City-St-Zip: MIAMI, FL 33177 City-St-Zip: Title: () Delete Title: () Change () Addition Name: COFIELD, EVA Name: Address: 14110 VAN BUREN STREET Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: () Change () Addition DELIFORD, CAROL Name: Name: 9775 PALMETTO CLUB DR. Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: () Delete Title: () Change () Addition HAMLER, ELSIE K Name: Name: 14651 SOUTHWEST 99TH COURT Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: () Change () Addition HOLLIS, OSSIE Name: Name: 14820 LOUIS STREET Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: () Change () Addition HOLLOWAY, ALEXANDRIA Name: Name: Address: 11026 SOUTHWEST 132ND PLACE #4 Address: MIAMI, FL 33186 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: ELSIE K HAMLER D 07/02/2008