

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000005647

FILED
Feb 04, 2008
Secretary of State

Entity Name: PROMISES OF HOPE FOUNDATION, INC.

Current Principal Place of Business:

5837 SW 163 AVE
MIAMI, FL 33193

New Principal Place of Business:

11050 SW 160 ST
MIAMI, FL 33157

Current Mailing Address:

5837 SW 163 AVE
MIAMI, FL 33193

New Mailing Address:

11050 SW 160 ST
MIAMI, FL 33157

FEI Number: 06-1778685 **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:

BULLARD, DENEEN
5837 SW 163 AVE
MIAMI, FL 33193 US

Name and Address of New Registered Agent:

BULLARD, DENEEN
11050 SW 160 ST
MIAMI, FL 33157 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: DENEEN BULLARD

02/04/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BULLARD, DENEEN
Address: 5837 SW 163 AVE
City-St-Zip: MIAMI, FL 33193

Title: DS () Delete
Name: BARRIERE, JORGE A
Address: 5837 SW 163 AVE
City-St-Zip: MIAMI, FL 33193

Title: DT (X) Delete
Name: BARRIERE, JORGE A
Address: 5837 SW 163 AVE
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BULLARD, DENEEN
Address: 11050 SW 160 ST
City-St-Zip: MIAMI, FL 33157

Title: DS (X) Change () Addition
Name: BARRIERE, JORGE A
Address: 11050 SW 160 ST
City-St-Zip: MIAMI, FL 33157

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: DENEEN BULLARD

DP

02/04/2008

Electronic Signature of Signing Officer or Director

Date