

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003941

FILED  
Jan 20, 2010  
Secretary of State

**Entity Name:** FOUNDATION HOPE AND LIFE U.S.A.CORP

**Current Principal Place of Business:**

2001 NW 194 TERR  
MIAMI GARDENS, FL 33056

**New Principal Place of Business:**

**Current Mailing Address:**

2001 NW 194 TERR  
MIAMI GARDENS, FL 33056

**New Mailing Address:**

**FEI Number:** 26-2496364

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CALERO, ANA J  
2001 NW 194 TERR  
MIAMI GARDENS, FL 33056 US

**Name and Address of New Registered Agent:**

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:**

Title: P  
Name: CALERO, ANA J  
Address: 2001 NW 194 TERR  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: VP  
Name: GRIMALDO, GLORIA  
Address: 2001 NW 194 TERR  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: TRE  
Name: ARICAPE, LUZ S  
Address: 2001 NW 194 TERR  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: SEC  
Name: GOMEZ, LILIANA  
Address: 2001 NW 194 TERR  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: DIRE  
Name: RAMIREZ, MAURA  
Address: 2001 NW 194 TERR  
City-St-Zip: MIAMI GARDENS, FL 33056

I hereby 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 all other like empowered.

**SIGNATURE:** ANA J CALERO

P

01/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date