

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000157

FILED
Apr 30, 2012
Secretary of State

Entity Name: NEW HOPE SOCIAL ACTIVITIES INC.

Current Principal Place of Business:

149 SW 1ST AVE
HOMESTEAD, FL 330307008 US

New Principal Place of Business:

Current Mailing Address:

149 SW 1ST AVE
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 26-3806336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BAPTISTE, MARCEL VP
149 SW 1ST AVE
HOMESTEAD, FL 33030 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: BAPTISTE, GUILENE
Address: 11938 SW 271 TER
City-St-Zip: HOMESTEAD, FL 33032

Title: VP
Name: BAPTISTE, MARCEL
Address: 11938 SW 271 TER
City-St-Zip: HOMESTEAD, FL 33032

Title: SEC.
Name: THOMAS, MUNOZ
Address: 4700 S.W 188 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33332 BR

Title: TRE.
Name: OXELAN, FELISTIN
Address: 159 S.W FIRST AVENUE
City-St-Zip: HOMESTEAD, FL 33030 DA

Title: ADV.
Name: LEOPAUL, SCUTT
Address: 118 S.W FIRST AVENUE
City-St-Zip: HOMESTEAD, FL 33030 DA

Title: ADV.
Name: ERMITH, VILGRAIN
Address: 149 S.W 1ST AVENUE
City-St-Zip: HOMESTEAD, FL 33030 DA

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: GUILENE BAPTISTE

D

04/30/2012

Electronic Signature of Signing Officer or Director

Date