

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N29076**

1. Entity Name

HOUSING OPPORTUNITIES PROJECT FOR EXCELLENCE, IN

Principal Place of Business

Mailing Address

18441 N.W. 2ND AVENUE
SUITE 218
MIAMI FL 33169
US18441 N.W. 2ND AVENUE
SUITE 218
MIAMI FL 33169-4517
US2. Principal Place of Business
18441 NW 2nd Ave3. Mailing Address
18441 NW 2nd Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 218

Suite 218

City & State
Miami, FloridaCity & State
Miami, FloridaZip
33169Country
USAZip
33169Country
USA4. FEI Number
65-0108794Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

00021444



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOMPSON, WILLIAM, JR
18441 N.W. 2ND AVENUE
SUITE 218
MIAMI FL 33169

Name

Thompson, William Jr.

Street Address (P.O. Box Number is Not Acceptable)

18441 NW 2nd Avenue

Suite 218

City

Miami

FL

Zip Code
33169

8. 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

Signature, typed or printed name of registered agent and title if applicable.

William Thompson, Jr.

(NOTE: Registered Agent signature required when reinstating)

January 1, 2000

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
JONES, DONALD
8240 S.W. 184TH LANE
MIAMI FL 33157 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VC
GARMAN, MELANIE H
220 ALHAMBRA CIRCLE
CORAL GABLES FL 33134 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
KENNEDYS, KARL D
1205 DREXEL AVE., 2ND FLOOR
MIAMI BEACH FL 33139 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
VASHTYE, LEON
200 ALTON ROAD
MIAMI BEACH FL 33139 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCEO
THOMPSON, WILLIAM JR
18441 N.W. 2ND AVENUE
MIAMI FL 33169 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Thompson, Jr.

January 1, 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #