

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48649

FILED
May 03, 2004
Secretary of State

Entity Name: THE HOPE CENTER FOUNDATION, INC.

Current Principal Place of Business:

666 SW 4TH STREET
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

666 SW 4TH STREET
MIAMI, FL 33130

New Mailing Address:

FEI Number: 65-0331601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HELLINGER, ANDREW B
200 S. BISCAYNE BLVD
2350
MIAMI, FL 33131 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: D () Delete
Name: ADER, MARSHALL
Address: 1717 N BAYSHORE DR 2656
City-St-Zip: MIAMI, FL 33129

Title: SD () Delete
Name: BLANK, TONY
Address: 9350 S DIXIE HIGHWAY 900
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: GOTTLIEB, KAREN
Address: PO BOX 1388
City-St-Zip: COCONUT GROVE, FL 33233

Title: T () Delete
Name: CAMPBELL, CLAY
Address: 9400 S DADELAND BLVD # 111
City-St-Zip: MIAMI, FL 33156

Title: VP () Delete
Name: ORCINOLO, SHAUN
Address: 150 PINE ISLAND RD # 210
City-St-Zip: PLANTATION, FL 333242667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TONY BLANK

SD

05/03/2004

Electronic Signature of Signing Officer or Director

Date