2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50918

ION ANNUAL REPORT FILED
Apr 29, 2005
Secretary of State

Entity Name: BOOK OF HOPE USA, INC.

Current Principal Place of Business: New Principal Place of Business:

3807 MCCAIN PARK DR 600 SW 3RD STREET

108 2280

NORTH LITTLE ROCK, AR 72116 US POMPANO BEACH, FL 330606931 US

Current Mailing Address: New Mailing Address:

3807 MCCAIN PARK DR 3111 SW 10 STREET

108 POMPANO BEACH, FL 33069 US

NORTH LITTLE ROCK, AR 72116 US

FEI Number: 65-0361050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATION COMPANY OF MIAMI INC. WEBBER, CINDY L 3111 SW 10 STREET

201 S. BISCAYNE BLVD. POMPANO BEACH, FL 33069 US MIAMI, FL 33131 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: CINDY L. WEBBER 04/29/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P () Delete Title: () Change () Addition

 Name:
 HOSKINS, ROBERT D.,
 Name:

 Address:
 3111 S.W. 10TH ST
 Address:

City-St-Zip: POMPANO BEACH, FL 33069 US City-St-Zip:

Title: DST () Delete Title: D (X) Change () Addition

 Name:
 CECIL CULBRETH,
 Name:
 HOSKINS, BOBBIE D,

 Address:
 3807 MCCAIN PARK DR. STE 108
 Address:
 3111 SW 10TH ST

 City-St-Zip:
 NORTH LITTLE ROCK, AR 72116
 City-St-Zip:
 POMPANO BEACH, FL 33069

Title: DV () Delete Title: () Change () Addition

 Name:
 BERKEY, DALE
 Name:

 Address:
 60 SHIAWASSEE AV. SUITE G
 Address:

 City-St-Zip:
 AKRON, OH 443333755
 City-St-Zip:

Title: DMO () Delete Title: DST (X) Change () Addition

 Name:
 CULBRETH, CECIL
 Name:
 BYKER, DAVID

 Address:
 1409 COOLHURST
 Address:
 3845 NAVAHO CT

 City-St-Zip:
 SHERWOOD, AR 72120
 City-St-Zip:
 GRANDVILLE, MI 49418

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: CINDY L. WEBBER AGNT 04/29/2005