## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N50918

Address:

City-St-Zip:

1409 COOLHURST

SHERWOOD, AR 72120

Entity Name: BOOK OF HOPE USA, INC.

FILED Apr 01, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3111 SW 10TH ST 3807 MCCAIN PARK DR POMPANO BEACH, FL 33069 US 111 NORTH LITTLE ROCK, AR 72116 US **Current Mailing Address:** New Mailing Address: 3807 MCCAIN PARK DR 3111 SW 10TH ST POMPANO BEACH, FL 33069 US NORTH LITTLE ROCK, AR 72116 US **FEI Number:** FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION COMPANY OF MIAMI INC. 1500 MIAMI CENTER 201 S. BISCAYNE BLVD. 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: D/P () Delete (X) Change ( ) Addition HOSKINS, ROBERT D., HOSKINS, ROBERT D., Name: Name: 1100 S. STATE RD. 7, #100 Address: 3111 S.W. 10TH ST Address: City-St-Zip: MARGATE, FL 33068 City-St-Zip: POMPANO BEACH, FL 33069 US Title: DST () Delete Title: () Change () Addition BAUGHMAN, MARILYN, Name: Name: Address: 537 NW 46TH AVE. Address: City-St-Zip: DEERFIELD, FL 33442 City-St-Zip: Title: () Delete Title: () Change () Addition BERKEY, DALE Name: Name: 60 SHIAWASSEE AV. SUITE G Address: Address: City-St-Zip: AKRON, OH 443333755 City-St-Zip: Title: DMO ( ) Delete Title: () Change () Addition Name: CULBRETH, CECIL Name:

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.

Address:

City-St-Zip:

SIGNATURE: CECIL CULBRETH ED 04/01/2003