

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000023565

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: FM HOPE, INC.

## Current Principal Place of Business:

1401 BRICKELL AVE STE 825  
MIAMI, FL 33131

## New Principal Place of Business:

## Current Mailing Address:

1401 BRICKELL AVE STE 825  
MIAMI, FL 33131

## New Mailing Address:

FEI Number: 54-2143975      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, FRANCISCO J ESQ  
2525 PONCE DE LEON BOULEVARD  
SUITE 400  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete  
Name: AMENABAR, JOSE I  
Address: 1401 BRICKELL AVE STE 825  
City-St-Zip: MIAMI, FL 33131

Title: PD ( ) Delete  
Name: ANDREWS, GUILLERMO  
Address: 1401 BRICKELL AVE STE 825  
City-St-Zip: MIAMI, FL 33131

Title: VPD ( ) Delete  
Name: LOPEZ, RODRIGO  
Address: 1401 BRICKELL AVE STE 825  
City-St-Zip: MIAMI, FL 33131

Title: VPD ( ) Delete  
Name: GUILOFF, HERNAN  
Address: 1401 BRICKELL AVE STE 825  
City-St-Zip: MIAMI, FL 33131

Title: VPD ( ) Delete  
Name: BASCH, MICHAEL  
Address: 1401 BRICKELL AVE STE 825  
City-St-Zip: MIAMI, FL 33131

Title: VPSD ( ) Delete  
Name: BASCH, CHARLES  
Address: 1401 BRICKELL AVE STE 825  
City-St-Zip: MIAMI, FL 33131

## 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:

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 Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE I. AMENABAR

VPD

04/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date