

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001553

Entity Name: REDEMPTION HOPE CENTER, INC.**Current Principal Place of Business:**3501 NE 3RD AVE
POMPANO BEACH, FL 33064**Current Mailing Address:**3501 NE 3RD AVE
POMPANO BEACH, FL 33064**FEI Number:** 47-0951902**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CLERVEAUX, HECTOR
3501 NE 3RD AVE
POMPANO BEACH, FL 33064 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:** CLERVEAUX HECTOR

02/01/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	CLERVEAUX, HECTOR
Address	5621 NW 43RD WAY
City-State-Zip:	COCONUT CREEK FL 33073

Title	SD
Name	DAPHNIS, WISNER
Address	22849 N. SANDALFOOT BLVD
City-State-Zip:	BOCA RATON FL 33428

Title	D
Name	BENJAMIN, RODRIGUE
Address	4751 SUGAR PINE DR
City-State-Zip:	BOCA RATON FL 33487

Title	D
Name	DUVERNY, ROLNEY
Address	2831 SW 15TH ST
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	D
Name	CATILUS, WILNER
Address	4761 NE 1ST TERR.
City-State-Zip:	POMPANO BEACH FL 33064

I hereby 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 all other like empowered.

SIGNATURE: HECTOR CLERVEAUX**DIRECTOR**

02/01/2018

Electronic Signature of Signing Officer/Director Detail

Date