

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000009788

**Entity Name:** HOPE FINANCIAL ALLIANCE, INC.

**Current Principal Place of Business:**

900 W 49 ST #424  
HIALEAH, FL 33012

**Current Mailing Address:**

900 W 49 ST #424  
HIALEAH, FL 33012

**FEI Number: 27-1094648**

**Certificate of Status Desired: No**

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

HOLT, EDWARD  
900 W 49 ST #424  
HIALEAH, FL 33012 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

**Officer/Director Detail :**

Title P  
Name HOLT, EDWARD  
Address 900 W 49 ST #424  
City-State-Zip: HIALEAH FL 33012

Title VP  
Name SILVA, BELEN  
Address 900 W 49 ST #424  
City-State-Zip: HIALEAH FL 33012

*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: EDWARD HOLT**

**PRESIDENT**

**05/21/2013**

Electronic Signature of Signing Officer/Director Detail

Date