

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000011349

**Entity Name:** INFINITE HOPE HUMANITARIAN, INC.

**Current Principal Place of Business:**

8235 NE MIAMI CT.  
MIAMI, FL 33138

**Current Mailing Address:**

P.O. BOX 380514  
MIAMI, FL 33238 US

**FEI Number:** 46-1446199

**Certificate of Status Desired:** No

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

AMBROISE, PIERRE LOUIS  
8235 NE MIAMI CT.  
MIAMI, FL 33138 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 D  
Name AMBROISE, PIERRE LOUIS  
Address 8235 NE MIAMI CT.  
City-State-Zip: MIAMI FL 33138

Title D  
Name DORCELUS, JUDY  
Address 120 NE 131ST STREET  
City-State-Zip: MIAMI FL 33161

Title D  
Name DAPHINIS, STEVENS  
Address 4950 NW 198TH STREET  
City-State-Zip: MIAMI GARDENS FL 33055

Title D  
Name OGE, MILDRED  
Address 1311 NW 116TH STREET  
City-State-Zip: MIAMI FL 33167

*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:** PIERRE LOUIS AMBROISE

**PRESIDENT**

**04/28/2017**

Electronic Signature of Signing Officer/Director Detail

Date