

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004998

Entity Name: SEED OF HOPE MINISTRIES, INC.**Current Principal Place of Business:**5530 SW 95TH COURT
MIAMI, FL 33165**Current Mailing Address:**5530 SW 95TH COURT
MIAMI, FL 33165 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARADIAGA, NORMAN J
5530 SW 95TH COURT
MIAMI, FL 33165 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	PRESIDENT
Name	MARADIAGA, NORMAN JOAQUIN
Address	5530 SW 95TH COURT
City-State-Zip:	MIAMI FL 33165

Title	SECRETARY
Name	MARADIAGA, MARLENE
Address	5530 SW 95TH COURT
City-State-Zip:	MIAMI FL 33165

Title	VICE PRESIDENT
Name	PINO, JOEL
Address	764 SW 99TH CIR.
City-State-Zip:	MIAMI FL 33174

Title	TREASURER
Name	SEREY, MARIA
Address	12839 SW 133RD ST
City-State-Zip:	MIAMI FL 33106

Title	DIRECTOR
Name	PINO, SHARON
Address	764 SW 99TH CIR
City-State-Zip:	MIAMI FL 33174

Title	DIRECTOR
Name	FLORES, JOSE ISRAEL
Address	9010 SW 137TH AVE 117
City-State-Zip:	MIAMI FL 33186

Title	DIRECTOR
Name	FLORES, MIRIAM ZARELA
Address	9010 SW 137TH AVE 117
City-State-Zip:	MIAMI FL 33186

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: NORMAN J MARADIAGA**PRESIDENT****02/04/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date