

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003483

Entity Name: HOME OWNERSHIP AND PERSONAL ENRICHMENT (H.O.P.E.)
INC.**FILED**
Feb 28, 2025
Secretary of State
6095947263CC**Current Principal Place of Business:**2261 NW 58 ST
MIAMI, FL 33142**Current Mailing Address:**2261 NW 58 ST
MIAMI, FL 33142**FEI Number: 65-0761739****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JONES, WILLIE J
2261 NW 58 ST
MIAMI, FL 33142 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 PD
Name JONES, TINEKA M
Address 2261 NW 58 ST
City-State-Zip: MIAMI FL 33142Title SD, SECRETARY
Name BARON, SONJA
Address 4699 NW 27TH AVE.
City-State-Zip: MIAMI FL 33142Title VTD
Name JONES, HELEN W
Address 2261 NW 58 TH STREET
City-State-Zip: MIAMI FL 33142Title D
Name FINNIE, LAURIE
Address 4699 NW 27TH AVE.
City-State-Zip: MIAMI FL 33142Title SD
Name JONES, EBONIE
Address 4699 NW 27TH AVE.7
City-State-Zip: MIAMI FL 33142Title D
Name JONES, MONIQUE M
Address 2261 NW 58 STREET
City-State-Zip: MIAMI FL 33142

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: HELEN JONES**DIRECTOR****02/28/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date