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Mar 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000000146 (9)

1. Corporation Name

ELPIS OUTREACH MINISTRIES INC.



Principal Place of Business

Mailing Address

9900 SW 168 ST
#05
MIAMI FL 33157

9900 SW 168 ST
#05
MIAMI FL 33157-4378

3. Date Incorporated or Qualified
01/09/1995

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0549736

Applied For
Not Applicable

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOPE, JOHN C SR.
9900 SW 168 ST
#05
MIAMI FL 33157

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME HOPE, JOHN C SR.
STREET ADDRESS 9900 SW 168 ST #05
CITY-ST-ZIP MIAMI FL 33157

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D DELETE
NAME HOPE, MONA M
STREET ADDRESS 20954 SW 85 PASSAGE
CITY-ST-ZIP MIAMI FL 33189-3326

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D DELETE
NAME HOPE, JOHN C JR.
STREET ADDRESS 18530 SW 299 ST
CITY-ST-ZIP MIAMI FL 33033

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME HOPE, D. KEVIN
STREET ADDRESS 1317 MOHR LAKE DR
CITY-ST-ZIP BRANDON FL 33511

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D DELETE
NAME HOPE, JENNIFER U
STREET ADDRESS 15325 SW 102 RD
CITY-ST-ZIP MIAMI FL 33157

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John C. Hope Sr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN C. HOPE SR. Pres 03/04/97 224
Date Daytime Phone # 0031233

CR2E037 (9/96)