

**FILED**  
**Aug 10, 1999 8:00 am**  
**Secretary of State**

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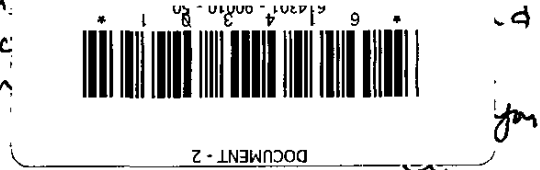
NONPROFIT CORPORATION  
**ANNUAL REPORT 1999**

FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS



**DOCUMENT # N96000000959**  
 1. Corporation Name  
**NEW ALTERNATIVES, INC. (NAI)**

Principal Place of Business Mailing Address  
**NAI CENTER, 1073 N.E. 125th St.,**  
**NORTH MIAMI, FL. 33161**



2. Principal Place of Business 21 <b>1073 NE 125th STREET</b> Suite, Apt. #, etc. 22 <b>N/A</b>	2a. Mailing Address 26 <b>P.O. Box 612681</b> Suite, Apt. #, etc. 27	3. Date Incorporated or Qualified <b>2/23/96</b>
23 <b>FL, NORTH MIAMI</b>	28 <b>N. MIAMI, FL.</b>	4. FEI Number <b>65-0677561</b> Applied For Not Applicable
24 <b>33161</b> 25 <b>DADE</b>	29 <b>33261</b> 30 <b>DADE</b>	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
24 <b>33161</b> 25 <b>DADE</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>-\$5.00 May Be Added to Fees</b>

9. Name and Address of Current Registered Agent <b>VICTOR M. ENAHORO (D)</b> <b>9965 MIRAMAR PKWY, #212</b> <b>MIRAMAR, FL. 33025</b>	10. Name and Address of New Registered Agent 81 Name <b>CHIDI M. ENAHORO (D)</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>1073 N.E. 125th ST.,</b> 83 <b>NORTH MIAMI</b> 84 City <b>FL</b> 85 Zip Code <b>33161</b>
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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]* DATE **7/29/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE (D) NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE <b>VICTOR ENAHORO, PRESIDENT</b> <b>9965 MIRAMAR PKWY, #212</b> <b>MIRAMAR, FL 33025</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE (D) NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE <b>CHIDI ENAHORO</b> <b>VICE PRESIDENT</b> <b>1073 N.E. 125th ST. N. MIA</b> <b>FL 33161</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE (T) NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE <b>GLORIA ASIKA, DIRECTOR</b> <b>9965 MIRAMAR PKWY, #212</b> <b>MIRAMAR, FL. 33025</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE (T) NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> DELETE <b>ANENE EJIKEME, DIRECTOR</b> <b>1073 N.E. 125th ST.</b> <b>N. MIA, FL. 33161</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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, with all other like empowered.

SIGNATURE: *[Signature]* **CHIDI ENAHORO, V.P.** DATE **7/29/99** (205) 710-2100

CR2E037 (11/98)