

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070908

FILED
Jan 06, 2007
Secretary of State

Entity Name: HOPE LAND INVESTMENTS, LLC

Current Principal Place of Business:

926 KERSFIELD CIR
LAKE MARY, FL 32746 US

New Principal Place of Business:

Current Mailing Address:

926 KERSFIELD CIR
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: 20-1680071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AWAD, REDA
926 KERSFIELD CIR
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GABRIEL, MARK A
Address: 265 WEST MAGNOLIA AVE
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: AWAD, REDA
Address: 2100 LINWOOD AVE APT 15V
City-St-Zip: FORT LEE, NJ 07024 US

Title: MGRM (X) Delete
Name: AWAD, OSAMA
Address: 2100 LINWOOD AVE APT 15V
City-St-Zip: FORT LEE, NJ 07024 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: AWAD, REDA
Address: 926 KERSFIELD CIR
City-St-Zip: LAKE MARY, FL 32746 US

Title: MGRM (X) Change () Addition
Name: AWAD, OSAMA
Address: 517 BLUFF RD
City-St-Zip: FORT LEE, FL 07024 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: AWAD REDA

MGRM

01/06/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date