	PLEASE	READ A	ALL INST	RUCTIONS	BEFORE C	OMPLE	HVO THOLE	ei			
ARF	PLICATION	<b>**</b>		A DEPARTMEN Katherine Ha		<u> </u>				٠	
FORM Secretary of State											
	STATEMENT		Di	VISION OF CORPOR	ATIONS 2	<u>{</u>		ED.	)		
DOCUMENT #M49331						00 APR 10 PM 1:57					
Future Hopes, Inc.						SECRETARY OF STATE					
101012 110pcs , I. C.							TALLAHASSEE. FLORIDA				
Principal Place of Business Mailing Address											
801 E. 8Th Ave 306 N. Highlands Dr.											
Hialeah, FL 33010 Hollywood, FL 33021							MARIOTA TOIS SEE SEE OF THE				
							REINSTATEMENT 97-00				
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable							Date Incorporated or Qualified				
				etc		To Do Business in Florida 3/27/1987					
						5. FELNumber Applied For Not Applied For					
City & State			Cit <del>y &amp;</del> -State -			Two Applicable					
Zip Country			Zip	Country		CERTIFICATE OF STATUS DESIRED S6.75 Additional Fee require					
7. Names a	nd Street Addresses of Each	Officer and/o	r Director (Flo	rida nonprofit corpora	tions must list at lea	st 3 directors)					
Title(s)	Name of and/or D	et Address of Each cer and/or Director	or City / State / Zip								
2				3 (DO NOT US	e Post Office Box N		14				
res	Ray His	CKS		Hollywood	λ 4	33021	140/1/1000	D.FL	334	021	
	1/ 1/	11.		/	11. ( )	6.5		,		}	
1P/TR Kathleen Hicks 306 M. Highlands Dr Hollywood, FL 3									330	02/	
SEC Richard Bolton 11900 Griffing							Biscayner	ark. F	7 3	3/6/	
SEC Kichard Bolton 11900 Griffing Blud. Biscaynetark, FL 3											
						1000032135914					
						-04/18/0001117008 ***1208.75 ***1208.75					
}			,							}	
8. Name and Address of Current Registered Agent							Name and Address of New Registered Agent				
Richard Bolton, Esq Name Pal							Be				
					Street Address (P.O. Box Number is Not Acceptable)						
10-1- Eves - Dairy Kd # 210						Eves VION-RD					
N. Miami, FC 3317				' <sup>9</sup>	City	\$tate   Zip Code					
·					NMB			FL	3317c		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.  Signature of Registered Agent											
Signature of Registered a	Agent		GISTERED AG	ENT MUST SIGN		<del></del>	Date			}	
REGISTERED AGENT MUST SIGN  11. This corporation owes the current year Intangible Personal Property Tax due June 30.  Yes No											
	_ <del></del>	· <del></del>	<del>-</del>		·			1.6	416 . Al1		
12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.											
SIGNATURE: Command D. Wich Fres. Ray Hicks 3/10/00 (305)888-2001											