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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary & State DIVISION OF CORPORATIONS

DOCUMENT # N9200000459 (9)

	EHEMIAH PROJECT OF HO	OMESTEAD, INC.	·	-			
30695 SW 162N HOMESTEAD F		30695 SW 162ND AVE HOMESTEAD FL 33033				3. Date Incorporated or Qualified 11/23/1992 4. FEI Number Applied For	
						65-0389868 Not Applicable	
2. Principal Place of Business 28. Mailing Address 26						5. Certificate of Status Desired \$8.75 Additional Fee Required	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State City & State 23 28						7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
Zip 24	Country 25	Zip 29	30 Cou	intry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre					10. Name and Address of New Registered Agent	
				81	Name		
TAYLOR, RENE 31400 SW 208TH CT				82	Street A	ddress (P.O. Box Number is Not Acceptable)	
				83			
HUMES	TEAD FL 33033						
				84	City	FL 85 Zip Code	
Pursuant office or ragent. La	to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 617.1508, Florida Statur o of Florida. Such change was pations of, Section 617.0503, Fl	les, the al authorize orida Stal	bove d by tutes.	-named c the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
	Signature typed or printed name of registered ag			d Ager	nt signature re	equired when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS DELETE	13.	Ti E		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Maddition	
NAME	NELSON, ROBERT	A beech	9			EMILIO FERNANDEZ	
STREET ADDRESS			1.3 \$1	1.3 STREET ADDRESS		416 BIANCA AVE.	
CITY-ST-ZIP			1.4 0)	1.4 CHTY-ST-ZIP		CORAL GABLES, FL 33146	
TITLE	PD	☐ DELETE	2 1 Tr	TLE		Change Addition	
NAME	TAYLOR, RENE		22 N			•	
STREET ADDRESS				2.3 STREET ADDRESS 2.4 City-St-Zip			
CITY-ST-ZIP	HOMESTEAD FL 33030			ITY-SI TLE	F-ZIP	☐ Change ☐ Addition	
NAME	AZAN, LUIS		3.2 NAME				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL		3.4. CITY		T- ZIP		
TITLE	TD	DELETE	4.1 TI	TLE		☐ Change ☐ Addition	
NAME	HOOPER, LARRY		4. 2 N				
STREET ADDRESS	29625 SW. 177TH AVE HOMESTEAD FL				ADDRESS		
CITY-ST-ZIP TITLE	HOMESTEAD FL	DELETE	4.4 CI 5.1 TI	TY-ST	- ZIP	☐ Change ☐ Addition	
NAME			5.2 N/			Onlings Addition	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			1	TY-ST	- 1		
TITLE		DELETE	6 1 Ti			☐ Change ☐ Addition	
NAME			62 N	AME			
STREET ADDRESS			6.3 ST	TREET A	ADDRESS		
CITY-ST-ZIP			6.4 CI	TY-ST	- 7IP		

Thereby certify that the information supplied with this filing does not qualify of 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 director of the corporation or director of the corporation or the receiver or director of the corporation or directo

SIGNATURE:

Luis J. Azan, Exec. Director 4/17/98

FILED

May 15 1998 8:00am

Secretary of State

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