SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/87: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N9400005811 (4)

HOPE WORLDWIDE - FLORIDA, INC.

FILED Aug 21 1997 8:00am Secretary of State

| Principa! Plac | e of Business | Mailing Address | | | | | | | |
|--|--|---|-------------------------|--|---|--|-------------------|---------------|---------------------------|
| | - | | | | | | | *** {141 }541 | |
| 12995 NE 7TH AVE TP:O=PD:=6008 | | 12995 NE 7TH AVE - P.S. BOX 206 8 | | | | | | | |
| MIAMI FL 33161 | | MIAMI FL 33161 US | | | DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 3a. Date of Last Report | | | | |
| 2. Principal Place of Business | | | | 3. Date Incorporated or Qualified 11/28/1994 | | 1/199 | • | | |
| 21 /299 | 5 NE 1th rive | 2a. Mailing Address 26 /2995 NE | 7+4 | Ave | e | 4. FEI Number 59-3284296 | | No | plied For t Applicable |
| Sulte, Apt. #, etc. | | Sulte, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | |
| City & Stat | Miami, FL | 28 N. Mian, FL | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| Zip 24 33/6 | Country 25 | Zip 29 33/6/ 3 | Country | / | | 8. This corporation owes or has pai Personal Property Tax due June | | | angible No |
| | g. Name and Address of Current | Registered Agent | | | • | 10. Name and Address of New Reg | | | |
| | | | 81 | Name | ı | | | | |
| BOYLES, WILLIAM A | | | | | Addres | s (P.O. Box Number is Not Acceptab | le) | | |
| 201 EAST PINE ST. | | | | | | | | | |
| SUITE 1200 | | | 83 | | | | | | |
| ORLAND | O FL 32801 | | 84 | City | | | FL 85 | Zip C | ode |
| 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 | | | | | | | | | |
| SIGNATURE | | | | | | | | | |
| 12, | Signature, typed or printed name of registered agent OFFICERS AND | | | ent signature | e required | when reinstating) | DATE | | |
| TITLE | DP OF THE PROPERTY OF THE PROP | DELETE | 13. 1.1 TITLE | | TN . | ADDITIONS/CHANGES TO OFFICE | ERS AND DIRE | | Addition |
| NAME | MCCORMICK, TODD D | | 1.2 NAME | | Die | 1. A Rudrianez | | iange | AUUIIIUII (AU |
| STREET ADDRESS | 15220 DUNBARTON PLACE | | 1.3 STREET | ADDRESS | 129 | hard Rudriguez 15 NE 7th Ame | | | |
| CITY-ST-ZIP | MIAMI LAKES FL | | 1.4 CITY - S | | | Miami, FC 33161 | | | |
| TITLE | D | DELETE | 2.1 TITLE | | D | | CI | nange | ★ Addition |
| NAME | MCCORMICK, PATRICIA E | | 2.2 NAME | | Ka | clyn Battle 108 Leeward Ct. # | | | |
| STREET ADDRESS | 15220 DUNBARTON PLACE | | 2.3 STREET | ADDRESS | 209 | 108 Leeward Ct. # | 231 | | |
| CITY-ST-ZIP | MIAMI LAKES FL | | 2. 4 CITY-5 | | AVC | entura, FL 33180 | | | |
| TITLE | D | ☐ DELETE | 3.1 TITLE | | D | | □ cı | iange | Addition |
| NAME | DEAM, DOUG | | 3.2 NAME | | Fos | ter Stanback | | | |
| STREET ADDRESS | 535 PALERMO AVE | | 3.3 STREET | ADDRESS | 219 | 54 Cartagena Dr. | | | |
| CITY-ST-ZIP | CORAL GABLES FL 33134 | | 3.4. CITY-5 | | BOC | a Raton , FL 334 | 28 | | |
| TITLE | D | DELETE | 4.1 TITLE | | DT | • | | nange | Addition |
| NAME | DEAM, ANN | | 4. 2 NAME | | | 1 Menendez | | | |
| STREET ADDRESS | 535 PALERMO AVE | | 4.3 STREET | ADDRESS | | 7 NW 149HA Terr | | | |
| CITY-ST-ZIP TITLE | CORAL GABLES FL 33134 | Detert | 4.4 CITY - S | 1 - ZIP | Mic | 201, FL 33016 | | | |
| NAME | DS DUCINDOLT DICUADD | ☐ DELETE | 5.1 TITLE | | D | As and Classes | ☐ Ch | ange | Addition |
| | RHEINBOLT, RICHARD 4045 VILLAGE DR., #C | | 5.2 NAME | | Dr. | Panela Stearns | | | |
| STREET ADDRESS | DELRAY BEACH FL | | 5.3 STREET | | 129 | 95 NG 7th Are | | | |
| CITY-ST-ZIP TITLE | DELINAT DEACH FL | X DELETE | 5.4 CITY+S 6.1 TITLE | 1-ZIP | NI | Miani, FL 33161 | Ch | 19500 | ☐ Addition |
| NAME | RHEINBOLT, KAREN | Car office | 6.2 NAME | | | | L. 011 | ange | L Addition |
| STREET ADDRESS | 4045 VILLAGE DR., #C | l | 6.3 STREET | ADDDECC | | | | | |
| CITY-ST-ZIP | DELRAY BEACH FL 33445 | | 6.4 CITY - S | | | | | | i |
| 14. I do hereb | v cartify that the information supplied a | with this filing does not qualify f | or the eve | motion e | tated in | Section 119.07(3)(i), Florida Statutes | I further certife | v that th | |
| 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. | | | | | | | | | |
| 14 CENEMATIDE DEPOSES | | | | | | | | | |