2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9400005811

HOPE WORLDWIDE - FLORIDA, INC.

123 CONGRESS AVE.

Principal Place of Business

Mailing Address 123 CONGRESS AVE.



Principal Pace of Business 192 C	US	EACH FL 33426		BOYNTON BEACH FL 3342 US	6	 		812) (1 132) 1812) (
Applied Sp. 33.19 C Country CLS APPLIED COUNTRY CLS APPLIED COUNTRY CLS APPLIED COUNTRY CLS APPLIED CL	14926 SW 142 Ct.		14926 SW 142 CT.		<u>7. </u>				
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CORPORATION SERVICE COMPANY 1201 HAY'S STREET TALLAHASSEE FL 32301 City FL City City FL City Ci	Zip 3318	·	usia	37186	Country USA		·	\$8.75 Ad	Iditional
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 City FL Zip Code 8. 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 Signature, horse or primary values of registered agent, or both, in the state of Florida. SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution.		6. Name	and Address of Current	Registered Agent		7. Name and Addi	ess of New Registered	•	
B. 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	1201 HAY	ys street				ervane, - Lê	والمداد ويوا والمهمة		* * * 2
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the state of Florida. SIGNATURE SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TRUE FOLKER, TERRY 1381 SW 27TH AVE. BOYNTON BEACH FL 33428 CITY-ST-2P BOYNTON BEACH FL 33428 CITY-ST-2P NAME BATTLE, KARLYN STREET ADDRESS TRUE NAME LEE, JEFF NAME AVILA, JOE L STREET ADDRESS CITY-ST-2P MAMI FL 33157 TILE NAME AVILA, JOE L STREET ADDRESS CITY-ST-2P MAMI FL 33179 TILE D CHANGES STREET ADDRESS CITY-ST-2P MAMI FL 33179 TILE D CHANGES STREET ADDRESS STREET ADDRES					City		FI	Zip Cod	le
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FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE DP FOLKER, TERRY 1381 SW 27TH AVE. SIRRET ADDRESS OTTY-ST-2P BOYNTON BEACH FL 33426 DT BATTLE, KARLYN AMME STREET ADDRESS OTTY-ST-2P TITLE NAME STREET ADDRESS OTTY-ST-2P TITLE DP STREET ADDRESS OTTY-ST-2P TITLE NAME STREET ADDRESS OTTY-ST-2P TOTTY-ST-2P TOTTY-ST-2P TOTTY-ST-2P NAMI R. 33179 Delete TITLE DP STREET ADDRESS OTTY-ST-2P TOTTY-ST-2P TO	SIGNATURE								
Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE NAME 1381 SW 27TH AVE. STREET ADDRESS CITY-ST-2P SOLVEN TO BEACH FL 33426 CITY-ST-2P STREET ADDRESS CITY-ST	, ì	Signature, typed o	or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent sign	ature required when reinstating)	DATE		
TITLE NAME NAME STREET ADDRESS TITLE NAME STREET ADDRESS TOTY-ST-ZIP TOT	· · ·	FILE NOW:		Trust Fund Co	ontribution.	Added to Fees	Departme	nt of State	•
FOLKER, TERRY 1381 SW 27TH AVE. BOYNTON BEACH FL 33426 TITLE NAME STREET ADDRESS CITY-ST-ZIP BATTLE, KARLYN 2051 NE 214TH TERR N MIAMI FL 33179 TITLE LEE, JEFF 7824 SW 165 ST CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TREET ADDRESS TRE		TDP -	OFFICERS AND DIF				S TO OFFICERS AND DI	RECTORS IN	10
BATTLE, KARLYN STREET ADDRESS CITY-ST-ZIP TITLE D LEE, JEFF 7824 SW 165 ST MIAMI FL 33157 TITLE NAME AVILA, JOE L NAME STREET ADDRESS CITY-ST-ZIP NAME AVILA, JOE L NAME STREET ADDRESS CITY-ST-ZIP NAME AVILA, JOE L NAME STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33324 TITLE D NAME NAME AMME AMME AMME AMME AMME STREET ADDRESS CITY-ST-ZIP Delete D DELET D D D DELET D D D DELET D D D D D D D D D D D D D D D D D D D	NAME STREET ADDRESS	FOLKER, TI 1381 SW 2 BOYNTON	7th ave.	≱ Delete	NAME STREET ADDRESS	Eric Abernathy 14926 SW 142 C		☑ Change	≥ Addition
NAME STREET ADDRESS CITY-ST-ZIP NAME NAME NAME NAME NAME NAME NAME NAME	NAME STREET ADDRESS	BATTLE, KA 2051 NE 21 N MIAMI FL	4TH TERR	☐ Delete	NAME STREET ADDRESS	John Brush 9102 St. 181 St.	6	☐ Change	Addition
AVILA, JOE L NAME STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33324 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33179 TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS	NAME STREET ADDRESS	LEE, JEFF 7824 SW 16 MIAMI FL 33		☐ Delete	NAME Street adoress	9325 Bay Vistas	Estab Blad. 2836	☐ Change	Addition
HERRON, CHANTAL 20481 NE 10TH PL STREET ADDRESS CITY-ST-ZIP MIAMI FL 33179 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME REHMAN, GRACE STREET ADDRESS AND Sandy per Dr. 8149 39 # 10 i Boyn fon Beach. F1 33436 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS	NAME STREET ADDRESS	AVILA, JOE 7941 NW 38 PLANTATIO	RD ST	☐ Delete	NAME STREET ADDRESS	pennis Nash 4039 Abscrea Dr	32309	☐ Change	Addition
NAME REHMAN, GRACE STREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS	NAME STREET ADDRESS	HERRON, C 20481 NE 16 MIAMI FL 33	OTH PL	☐ Delete	NAME STREET ADDRESS	Brace Rennan 3801 Sandjeper Dr. B Boynton Beach, F1	33436 119 39 # 101	∑ Change	Addition
12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made upday onto the true confliction.	NAME STREET ADDRESS CITY-ST-ZIP	REHMAN, G 4215 NW 16 MIAMI FL 33	8 TERR 055		NAME STREET ADDRESS CITY-ST-ZIP	1047 NE 202 L. Missoni, fi 3317	9		

indicated by his report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNA

FANTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #