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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

## N95000002915 (5) DOCUMENT #

EMANUEL REVIVAL TEAM, INC.

| Principal Place of Business Mailing Address                                       |                                   |                       |                               |   |                    |                                       |                         |                    |                                 |   | 110011111111111  | # 1#1#: #1111 HO111 GO111 | <b>OB</b> 111 <b>O P</b> 747 <b>B</b> | #11 <b>#</b> 41 <b>#</b> 19 4 <b>#</b> 1#1 | 11881 8111 1881 |
|---|-----------------------------------|-----------------------|-------------------------------|---|--------------------|---------------------------------------|-------------------------|--------------------|---------------------------------|---|--|---------------------------|---------------------------------------|--|-----------------|
| 1521 NW 17TH ST. 1521 NW 17TH ST. FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311 |                                   |                       |                               |   |                    |                                       | . 33311                 |                    |                                 |   |  |                           |                                       |  |                 |
|   |                                   |                       |                               |   |                    |                                       |                         |                    |                                 | 06/15/  | rated or Qualified<br>1995   | 3a, C                     | oate of Last F                        |  |                 |
| 2. Principal Place of Business  |                                   |                       |                               |   |                    | 2a. Mailing Address                   |                         |                    |                                 | 4. FEI Number   | 70151  |                           | h                                     | Applied For                                |                 |
| 21  |                                   |                       |                               |   |                    | 26                                    |                         |                    |                                 |   | 62-60  | 60131                     |                                       |  | Not Applicable  |
| 22  | Suite, Apt. #, etc.               |                       |                               |   |                    | Suite, Apt. #, etc.                   |                         |                    |                                 | 5. Certificate of   | Status Desired   |                           |                                       | Additional<br>Required                     |                 |
|   | City & State                      |                       |                               |   | City & State       |                                       |                         |                    | 6. Election Cam<br>Trust Fund C |   |  |                           | 0 May Be<br>I to Fees                 |  |                 |
|   | Country 25                        |                       |                               | 29  | Zip                | Cour<br>30                            |                         |                    |                                 | 8. This corporation has liability for intangible tax upder s. 199.032, Florida Statutes |  |                           |                                       |  |                 |
| <u>                                    </u>                                       |                                   |                       |                               | ss of Current   |                    | ered Agent                            |                         | T                  |                                 |   |  | Address of New F          | legistered                            | l Agent                                    |                 |
|   |                                   |                       |                               |   |                    |                                       |                         | 81                 | Nan                             | ne  |  |                           |                                       |  |                 |
| HODGE, EVELENA S  |                                   |                       |                               |   |                    |                                       |                         | 82                 | Stre                            | et Addre  | ess (P.O. Box Numb   | er is Not Acceptat        | ole)                                  | e.   |                 |
| 1521 NW 17TH ST.<br>FT. LAUDERDALE FL 33311                                       |                                   |                       |                               |   |                    |                                       |                         |                    |                                 |   |  |                           |                                       |  |                 |
|   | TI. DIODE                         | SUPPLE 1              | L 00011                       |   |                    |                                       |                         | 84                 | City                            |   |  |                           | <del></del>                           | 85 Zip                                     | Code            |
|   |                                   |                       |                               |   |                    |                                       |                         |                    |                                 |   |  |                           | FI                                    | <b>-</b> 1 1                               |                 |
|   | or registered<br>familiar with, : | agent, or<br>and acce | both, in the<br>of the obliga | State of Florida<br>ations of, Sections of registered agent a | a. Such<br>n 617.0 | change was auth<br>503, Florida Stati | orized by trii<br>utes. | e corp             | oralio                          | iis Doan  | ation submits this st<br>d of directors. I here<br>when reinstating) | aby accept the app        | ointment a                            | s registered                               | agent. I am     |
| 12.   | Sigi                              | nature, typed         |                               | OFFICERS AND  |                    |                                       | 1:                      |                    | it organia                      | aro rodores   |  | CHANGES TO OFF            |                                       | D DIRECTO                                  | RS IN 12        |
| TITLE   |                                   | PCS.                  | JEN7                          |   | , Divido           | ["]DELETE                             |                         | TITLE              |                                 | 13  | DARY OF  | DIRECTO                   |                                       | Change                                     | [Z] Addition    |
| NAM   | Y'                                | nel e                 | EM/A                          | 9. Hoc  | 19=                |                                       | 1.2                     | NAME               |                                 | 1   | MARCHS 1   | 40d98                     |                                       |  |                 |
| NAME EVELENA 3. HOO<br>STREET ADDRESS 1521 N.W. 177 3                             |                                   |                       |                               |   |                    | 5.7.                                  |                         |                    | ADDRE                           | ss / 15   | 3/1/11   | 1720                      | 7                                     |  |                 |
|   | -S1-ZIP                           |                       | Chul                          | xd115.  | FI                 | L 333/                                | 7 14                    | CHY-S              | T-ZIP                           | F   | 7. Loude   | x dals, 1-                | 24 6                                  | 733/1                                      |                 |
| TITL  |                                   | CE                    | Des.                          | 1 dENT  |                    | DELETE                                | 2.1                     | TITLE              |                                 | 30  |  | DIRECTOR                  | P                                     | []] Change                                 | Addition        |
| NAM   |                                   | ENL                   | # · -··                       | 0.66  | 15/1               | <b>*ル</b> s                           | 2.3                     | NAME               |                                 | De  | HORES d  | UMPKIN                    |                                       |  |                 |
| STRE  | ET ADDRESS 📝                      |                       | NW.                           | 3674  | 7                  | <i>ક્રેસ્ટ</i>                        |                         | STREET             |                                 | SS 50   | 329 BAK  | K149 TOY                  | CIK                                   | 215  |                 |
|   | -ST-ZIP                           | -7_                   | 2040                          | ERCHIE,   | 1                  | 3331                                  |                         | 4 CITY -           | ST-ZIP                          | _  =5   | ARAZOZA  | 3, 1-4                    | 943                                   | Change                                     | ☐ Addition      |
| TITU  | 000                               | xine                  | PRE.                          | SINGENT   |                    | DELETE                                |                         | TITLE              |                                 |   |  |                           |                                       | L.J Change                                 |                 |
| NAN   | ·   /                             | KUB)                  | 1' B.,                        | I-BUKL  | 1                  |                                       |                         | 2 NAME<br>3 STREET | . YUUU                          |   |  |                           |                                       |  |                 |
|   | EET ADDRESS                       | 1691                  | 5, 5                          | 了学 生  | VEI                | 33023                                 |                         | STMEET<br>LOTY-1   |                                 | .,,,,   |  |                           |                                       |  |                 |
| TITL  | -ST-ZIP                           | 401                   | YW C                          | US J  | <u> </u>           | DELETE                                |                         | TITLE              | 01-41                           |   |  |                           |                                       | ☐ Change                                   | ☐ Addition      |
| NAM   |                                   | TTOCKU                |                               | 1/0/1010  | nv                 | . =                                   | 4.                      | 2 NAME             |                                 | ļ   |  |                           |                                       |  |                 |
|   | EET ADDRESS                       | 17/3                  |                               | LADN  | \$7.               |                                       | 4.                      | 3 STREET           | ADDRE                           | SS  |  |                           |                                       |  |                 |
| 1   | r-ST-ZIP                          | 1281                  | 1023                          | 000 F   | 2                  | 33021                                 | 2 4                     | 4 CITY - S         | ST-ZIP                          |   |  |                           |                                       |  |                 |
| TITL  |                                   | ファニ                   | SURE                          | P   |                    | DELETE                                | 5.                      | 1 TITLE            |                                 |   |  |                           |                                       | Change                                     | Addition        |
| NAN   | AE j                              | VIA-                  | 1.5                           | DUNBA.  | P                  | ·                                     |                         | 2 NAME             |                                 |   |  |                           |                                       |  |                 |
| STR   | EET ADDRESS                       | 605                   | XI. W                         | 10 74   | 5                  | 7, 2200                               |                         | 3 STREET           | i addri                         | SS  |  |                           |                                       |  |                 |
| CITY  | (-S1-ZIP                          | MA                    | LLAN                          | dAIE  | 7-1                | , 3300                                |                         | 4 C/TY-5           | ST-ZIP                          |   |  |                           | ,                                     | Change                                     | Addition        |
| TITL  | ŧ 6                               | BOAR                  | d OF                          | DIRECT  | ER                 | DELETE                                | 6                       | 1 TITLE            |                                 |   |  |                           |                                       | □ cusuñs                                   | F"1 MODEROIL    |

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

NAME OF BIGNING OFFICER OF DIRECTOR

33312

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1 19.07(3)(N, 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 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 attackment with an address.

- 1 (1844) (1864 | 1864 | 1864 | 1864 | 1864 | 1864 | 1864 | 1864 | 1864 | 1864 | 1864 | 1864 | 1864 | 1864 |