1998       Division or coherent increase       Secretary of State         DOULMENT # N96000006276 (7) BOLD NEW VISION COMMUNITY DEVELOPMENT, INC.       Image: Community development, INC.         Image: Proceed of Euclinese       Mailing Address       Image: Community development, INC.         Image: Proceed of Euclinese       Mailing Address       Image: Community development, INC.         Image: Proceed of Euclinese       Mailing Address       Image: Community development, INC.         Image: Proceed of Euclinese       Mailing Address       Image: Community development, INC.         Principal Proce of Euclinese       Mailing Address       Image: Community development, INC.         Principal Proce of Euclinese       Address of Country       Image: Country         Principal Proce of Euclinese       Image: Country       Image: Country       Image: Country         Principal Proce of Euclinese       Image: Country       Image: Country       Image: Country       Image: Country         ZD       Country       Image: Country       Image: Country       Image: Country       Image: Country       Image: Country         ZD       Country       Image: Coun	FILE NOW: FILING FEE IS \$61.25 NONPROFIT CORPORATION ANNULAL DEPORT					FILED May 20 1998 8:00an		
BOLD NEW VISION COMMUNITY DEVELOPMENT, INC.         Introduel Place of Business       Maing Address         Introduel Place of Business       Maing Address         OutPM ST       OPA LOCKA FL 3004         State Act, R. B.       OPA LOCKA FL 3004         State Act, R. B.       State Act, R. B.         State Act, R. B. </th <th colspan="3">ANNUAL REPORT</th> <th colspan="2">•</th> <th colspan="3">Secretary of State</th>	ANNUAL REPORT			•		Secretary of State		
AL LOCKA, FL 33054       OPA LOCKA, FL 33054       OPA LOCKA, FL 33054       A Locka FL 33054         Principal Place of Business       25. Mailing Address       4. Application       Applied Formation         Principal Place of Business       25. Mailing Address       6. Certificate of Status Deviced       56.75 Additional         Buile, Apti 4, etc.       21.0       Status       7. Is this mapping Place of Business       55.00 May Be Deviced       7. Status         City & Statu       City & Statu       City & Statu       7. Is this mapping Place of the application a thomeownert association?         Zp       20       Country       Zp       Country       8. Do May Be         Zp       20       Country       Zp       Country       Name and Address of Name Place of the application a thomeownert association?         Zp       20       Country       Zp       Country       2p       Country       2p         20       Country       2p       Country       2p       Status       Name and Address of Name Name Name Name Name Name Name Name	BOLD	NEW VISION COMMUNIT	Y DEVELOPMENT, INC	•				
Principal Place of Business         Ja.         Mailing Address         65-0712963         Not Applicable           Buils Aptil: # etc.         28         Suite Aptil: # etc.         27         Suite Aptil: # etc.         28         Stite Aptil: # etc.         27         Stite Aptil: # etc.         27         Stite Aptil: # etc.         27         Stite Aptil: # etc.         28         Stite Aptil: # etc.         27         Stite Aptil: # etc.         28         Stite Aptil: # etc.         25.000 May Be Aptil: # etc.         55.000 May Be Aptil: # etc.	10 Caliph St Pa Locka Fl 33054					12/09/1996		
Principal Place of Business       2a. Mailing Address       6. Certificate of Sature Desired       58.75 A sature and								
Suite April 4, etc.       Suite April 4, etc.       B. Election comparing Financing Address of State Field         City & State       City & State       City & State       This is nonportation a homeowner association?         Zip       Country       Zip       Country       B. This corporation owes on tas paid the current year immubile Personal Property Tax duo Juno 30       The set on the main of the set of	Principal F	Place of Business						
City & State       City & State       City & State       Pice	Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$5.0	0 May Be
Zip         Country         Zip         Country         Zip         Country         End scoperation owe on has paid to express the printing/blop Personal Property Tax due Junn 20.         No                • Name and Address of Current Registered Agent               • Sime and Address of New Registered Agent               • Sime and Address of New Registered Agent                 PETERSON, JOHN L JR               • Sime and Address of New Registered Agent               • Sime and Address of New Registered Agent                 PetERSON, JOHN L JR               • Sime Address             • OF Nome and Address             • OF Nome             • OF Nome and	City & Stat	le						
25     29     30     Prescrat Proposition of the paint in the Unit in the Period Per	<b>Z</b> in	Country		Count	n.4		Yes No	
PETERSON, JOHN L JR     81     Name       PBD CALIPH ST OPA LOCKA FL 33054     81     Street Address (P.O. Box Number is Not Acceptable)       82     Bit optimize is a street address (P.O. Box Number is Not Acceptable)       83     84     City       84     City     FL       85     84     City       86     City     FL       87     85     Zip Code       98     Caliphize is a street address (P.O. Box Number is Not Acceptable)       88     Bit is a street address (P.O. Box Number is Not Acceptable)       98     Caliphize is a street address (P.O. Box Number is Not Acceptable)       99     Caliphize is a street address of the appoint of the appointe appoint appoint of the appoint of the appoint of the appoint of	]	25	29	<u> </u>	У	Personal Property Tax due June	30. 🗍 Yes	
PETERSON, JOHN L JR 940 CALIPH ST OPA LOCKA FL 33054 <pre></pre>		9. Name and Address of Curr	rent Registered Agent	8	Name	10. Name and Address of New Re	gistered Agent	
B4D CALIPH ST OPA LOCKA FL 33054       B3         B4       City       FL       B5       Zip Code         ** Pursuant to the provisions of Socions 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 Stato of Florida, Such change was submitzed by the corporation's board of directors. I hereby accept the diagnostic of, Socion 617.0503, Florida Statutes.         CMATURE       Supplicit invest or pretect new of registered agent and the Purpleted Agent egature registered agent agent, or both, in the Stato of Plorida. Such change was submitzed by the corporation's board of directors. I hereby accept the diagnostic of, Socion 617.0503, Florida Statutes.         CMATURE       Supplicit invest or pretect new of registered agent and the Purpleted Agent egature registered agent agent and the Purpleted agent and the Purpleted Agent egature registered agent agent and the Purpleted Agent egature registered agent agent and the Purpleted Agent egature registered agent egature registered agent agent and the Purpleted Agent egature registered agent egature regature regature regature registered agent egature registered agen				8:		dress (P.O. Box Number is Not Acceptat	ole)	
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, and table appointment as registered agent, and table appointment as registered agent. The state of Florida, Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Let appoint and state appoint and state appointment as registered agent. Let appoint and state appointment as registered agent. Let appoint and state appointment as registered agent. Let appoint and ster appointment as registered agent. Let appoint and ster appointment as registered agent. Let appoint and ster appoint and ster appointment as registered agent. Let appoint and ster appoint appoint and ster appoint and ster appoint appoint appoint and ster appoint appoint appoint appoint and ster appoint						· · · · · · · · · · · · · · · · · · ·		
Pursuant to the provisions of Socions 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, and back accept the obligations of. Socion 617 0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of socion 617 0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of social of 617 0503, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent and the herebit statutes are required where requires the appointment as registered agent and the herebit statutes are required where requires a second accept the obligations of social agent and the herebit the appointment as registered agent and the herebit statutes are required agent and the herebit agent and the herebit statutes agent and the herebit statutes agent and the herebit statutes agent and the herebit agent agent and the herebit agent agent and the herebit agent	0177.20	014112 00004		84	City		85 7	in Code
2       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         LE       P0       IDELETE       11 TITLE       IChange       Addition         MRE       PETERSON, JOHN L JR       IDELETE       11 TITLE       IChange       Addition         MRE       POISALIH ST       IDELETE       11 TITLE       IChange       Addition         IV-ST-ZP       OPA LOCKA FL 33054       IDELETE       21 TITLE       IChange       Addition         MRE       BLOUNT, MARY       22 STREET ADDRESS       IDELETE       21 TITLE       IChange       Addition         MRE       BLOUNT, MARY       23 STREET ADDRESS       IDELETE       21 TITLE       IChange       Addition         MRE       BLOUNT, MARY       23 STREET ADDRESS       IDELETE       21 TITLE       IChange       Addition         MRE       BLOUNT, MARY       IDELETE       31 TITLE       IChange       Addition         MRE       POD SALIH ST       32 STREET ADDRESS       IDELETE       IDELETE       IChange       Addition         MRE       PETERSON, LAVERNA       33 STREET ADDRESS       IDELETE       IDELETE       IDELETE       IDELETE       IDELETE       IDELETE       IDELETE       IDELETE       IDELETE <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>g its registered as registered</th>								g its registered as registered
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SD       DELETE       21 ITTLE         MRE       BLOUNT, MARY       22 NAME         RET ADDRESS       0790 NW 186 ST APT 112       23 STREET ADDRESS         MIAMI FL 33169       2.4 CITY-ST-ZIP         LE       DELETE       31 TITLE         MRE       PETERSON, LAVERNA       32 STREET ADDRESS         901 SALIH ST       33 STREET ADDRESS         ITY-ST-ZIP       OPA LOCKA FL 33054       34. CITY-ST-ZIP         LE       DELETE       41 ITTLE         ME       Addition         ME       S1 STREET ADDRESS         Y-ST-ZIP       OPA LOCKA FL 33054       34. CITY-ST-ZIP         LE       DELETE       41 ITTLE         ME       Addition       4.2 NAME         RET ADDRESS       Y-ST-ZIP       Change       Addition         ME       DELETE       5.1 ITTLE       Change       Addition         ME       S2 NAME       S3 STREET ADDRESS       Change       Addition         ME       S3 STREET ADDRESS       S3 STREET ADDRESS       Change       Addition         ME       S3 STREET ADDRESS       S3 STREET ADDRESS       Change       Addition         ME       S3 STREET ADDRESS       S3 STREET ADDRESS       S3 STREET AD	2.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	
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