


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 10, 2005 8:00 am
Secretary of State

05-10-2005 90117 012 ***150.00

DOCUMENT # P04000078499	
1. Entity Name FLORIDA NEW HOPE REAL ESTATE, INC.	

DO NOT WRITE IN THIS SPACE

50051339

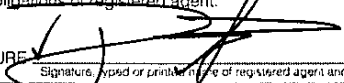
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1941 N 66th AVENUE Suite, Apt. #, etc.	3. Mailing Address 1941 N 66th AVENUE Suite, Apt. #, etc.
City & State HOLLYWOOD, FL	City & State HOLLYWOOD, FL
Zip 33024	Country USA

4. Filing Number 77-0634073	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name JINO S. ST. LOT SR.	
	Street Address (P.O. Box Number is Not Acceptable) 1941 N 66th AVENUE	
	City HOLLYWOOD,	Zip Code FL 33024

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. I am familiar with, and accept the obligations of registered agent.

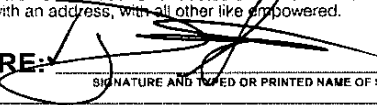
SIGNATURE:  JINO S. ST. LOT SR. MAY 2nd, 2005

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning.) DATE

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR JINO S. ST. LOT SR. 1941 N 66th AVENUE HOLLYWOOD, FL 33024	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT SHANNON CARSON 1941 N 66th AVENUE HOLLYWOOD, FL 33024	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER ROSAILE ST. LOT 9101 S LAKE MIRAMAR CIRCLE MIRAMAR, FL 33025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing 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 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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  JINO S. ST. LOT SR. MAY 2nd, 2005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2034B (12/02)