FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000026102 (0)

N.H.P.,	CORPORATION						
Principal Plac	e of Business	Mailing Addre	ISS		_		BOILT LININ DIINT EINSI BRSEN HAS INDI
434 STONEMONT DR. 434 STONEMONT DR. FT. LAUDERDALE FL 33326 FT. LAUDERDALE FL 33326				6		DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						04/03/1995	
2. Principal Place of Business 2a. Mailing Add			dress			4. FEI Number	Applied For
26 Suite, Apt. #, etc. Suite, Apt.						65-0573092	Not Applicable
22	#, € (C.	<u> </u>	Suite, Apl. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zφ		Country	,	8. This corporation owes or has paid	the current year Intangible
24	25			30		Personal Property Tax due June 30. Yes No	
	Name and Address of Curre	ent Registered Agen	t			10. Name and Address of New Reg	stered Agent
	GISTER AGENT SERVICE CORI	PORATION		81	Name		
434 STONEMONT DRIVE			82	Street A	ddress (P.O. Box Number is Not Acceptable	o)	
FT. LAUDERDALE FL 33326				83			
				84	City		FL 85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE						corporation submits this statement for the publication's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
12.				13.	ani signature n	ADDITIONS/CHANGES TO OFFICE	· · · · · · · · · · · · · · · · · · ·
TITLE	PO		DELÈTE	1 1 TITLE		ABBITION GOT WINGED TO OTT TOE	Change Addition
NAME	DOMINGUEZ, NORA			1.2 NAME	1		
STREET ADDRESS	% 434 STONEMONT DR.			1.3 STREET	ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33326	ı		1.4 CITY-S			
TITLE	STD		DEL E TE	2.1 TITLE			Change Addition
NAME	DOMINGUEZ, CARLOS			2.2 NAME	1		
STREET ADDRESS	1888 % 434 STONEMONT DR .			2.3 STREET	ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33326			2. 4 CITY - 9	ST-ZIP		
TITLE	U		DELETE	3.1 TITLE			Change Addition
NAME	MONROY, NELSON			3.2 NAME			
STREET ADDRESS	% 434 STONEMONT DR.			3.3 STREET	ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33326		· _	3.4. CITY - 9	ST-ZIP		
TITLÉ ·	D LAFEE OBAGELA	لــا	DELETE	4.1 THLE	1		Change Addition
NAME	LAFEE, GRACIELA			4. 2 NAME	1		
STREET ADDRESS	% 434 STONEMONT DR.			4.3 STREET			
CITY-ST-ZIP	FT. LAUDERDALE FL 33326		DÉLETE	4.4 CITY - S	T-ZIP		Change
TITLE			DELETE	5.1 TITLE	- 1		Change Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET			
CITY-ST-ZIP TITLE			DELETE	5.4 CITY - S 6.1 TITLE	1-ZIP		Change Addition
NAME		٠		6.2 NAMÉ			Fri Assende Fri Location :
STREET ADORESS				6.3 STREET	ADDRESS		

14. I hereby 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 annual report or suppliemental 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

April 29,1997

FILED

May 06 1998 8:00am

Secretary of State