

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90089 049 ***158.75

DOCUMENT # P95000061766

Entity Name

NEW WORLD PROPERTY DEVELOPMENT CORP.

Principal Place of Business

N. 21 AVENUE
TALLAHASSEE FL 33020

Mailing Address

1295 N. 21 AVENUE
HOLLYWOOD FL 33020-3145
US

Principal Place of Business

3100 N. 29th COURT
Suite, Apt. #, etc.
HOLLYWOOD, FLORIDA
City & State

3. Mailing Address

3100 N. 29th COURT
Suite, Apt. #, etc.
HOLLYWOOD, FLORIDA
City & State

Zip

33020

Country

USA

Zip

33020

Country

USA

6. Name and Address of Current Registered Agent

SELLERS, STEVEN E
318 N. CALHOUS STREET
TALLAHASSEE FL 32301

4. FEI Number

65-0606505

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)



FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.



**\$5.00 May Be
Added to Fees**

OFFICERS AND DIRECTORS

ST	ZIP	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete
D		DOLNICK, PAUL	1295 N. 21ST. AVENUE	HOLLYWOOD FL 33020	<input type="checkbox"/>
D		SMITH, TIM	1295 N. 21ST AVENUE	HOLLYWOOD FL 33020	<input type="checkbox"/>
D		TRANSLEAU, BARRY	1295 N. 21ST. AVENUE	HOLLYWOOD FL 33020	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

12.

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Change	Addition
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/22/00 954-923-4747

CR2E034 (9/99)