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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P95000080848 (1)

T & R HOPKINS ENTERPRISES, INC.

Mailing Address Principal Place of Business 9261 S.W. 54TH PLACE 9261 S.W. 54TH PLACE COOPER CITY FL 33328 COOPER CITY FL 33328 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

								10/18/1995					
2. Principal Place of Business			2a. Mailing Address					4. FEI Number			Applied For		
21			26					65-0637378			Not Applicable	е	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Regulred			
22			27									_	
Щ	City & State			City & State				6. Election Campaign Financing	_		5.00 May Be		
23			28					Trust Fund Contribution	<u></u>	A	dded to Fees	_	
	Zıp	Country		Ζip	Cou	intry		8. This corporation owes or has p	aid the c	urrent ye	ear Intangible		
24		25	29		30			Personal Property Tax due Jun	e 30.	Yes	□ No		
g. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent						
OCCA ON SATURACE						81	Name						
						82	Street Address (P.O. Box Number is Not Acceptable)						
						83						_	
						84	City		FI	L 65	Zip Code	_	
							4						

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.

SIGNATURE	Signature, typod or printed name of trigintered agent and title if applicable (NO	TE: Registered Agent signature required when i	reinstating) DATE		
12.	OFFICERS AND DIRECTORS		DDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12
TITLE	D DELETE	1.1 TITLE		Change	☐ Addition
NAME	HOPKINS, TIMOTHY M	1.2 NAME			1
STREET ADDRESS	9261 SW 54TH PL	1.3 STREET ADDRESS			
CITY-ST-ZIP	COOPER CITY FL 33328	1.4 CITY - ST - ZIP			
TITLE	DELETE	2.1 TITLE		Change	Addition
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
CITY-ST-ZIP		2. 4 CITY-ST-ZIP			
TITLE	☐ DELETE	3.1 TITLE		Change	Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY+ST-ZIP			
TITLE	DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME		4. 2 NAME			i
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY - ST - ZIP			
TITLE	DELETÉ	5.1 TITLE		Change	Addition
NAME		5.2 NAME			
STREET ADDRESS		5 3 STREET ADDRESS			1
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	DELETE	6.1 TITLE		Change	☐ Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			

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

6.4 CITY-ST-ZIP

Timothy M. HOPKINS

FILED

Apr 28 1998 8:00am

Secretary of State