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Apr 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000064876 (1)

1. Corporation Name
HOPE'S & DREAMS, INC.



Principal Place of Business

3386 S.E. 54TH AVENUE
OCALA FL 34471

Mailing Address

3386 S.E. 54TH AVENUE
OCALA FL 34471-9423

3. Date Incorporated or Qualified
08/02/1996

3a. Date of Last Report
N/A

2. Principal Place of Business

21 1625 S. PINE AVE

Suite, Apt. #, etc.

22

City & State

23 Ocala FL

24 34471

Country

25 MARION

2a. Mailing Address

26 200 E DAKOTA CT

Suite, Apt. #, etc.

27

City & State

28 HERNANDO

29 34442

Country

30 CITRUS

4. FEI Number

59-3396578

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

PAVASIA, REKHA J
3386 S.E. 54TH AVENUE
OCALA FL 34471

10. Name and Address of New Registered Agent

81 Name

DILIP R PATEL

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

83 200 E DAKOTA CT

84 City

HERNANDO

FL

85 Zip Code

34442

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

(NOTE: Registered Agent signature required when reinstating)

DATE

D. Patel. (DILIP R PATEL)

JAN 30, 97

12. OFFICERS AND DIRECTORS

TITLE PTD ☒ DELETE

NAME PAVASIA, REKHA J
STREET ADDRESS 3386 S.E. 54TH AVENUE
CITY-ST-ZIP Ocala FL 34471

TITLE VSD ☒ DELETE

NAME PATEL, DEVI R
STREET ADDRESS 3386 S.E. 54TH AVENUE
CITY-ST-ZIP Ocala FL 34471

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PVSTD ☐ Change ☒ Addition

1.2 NAME DILIP R PATEL
1.3 STREET ADDRESS 200 E DAKOTA CT
1.4 CITY-ST-ZIP HERNANDO, FL-34442

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: D. Patel. (DILIP R PATEL) JAN 30, 97 352-527-2510

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0437855

CR2E034 (9/96)