

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

**FILED**

**Mar 11 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000100699 (3)**  
1. Corporation Name  
**HOPE LANE DESIGN, INC.**



Principal Place of Business <b>121 CRANDON BLVD. STE 359 KEY BISCAVNE FL 33149</b>	Mailing Address <b>121 CRANDON BLVD. STE 359 KEY BISCAVNE FL 33149</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>200 Ocean Lane Drive</b> Suite, Apt. #, etc. 22 <b>Suite 1206</b> City & State 23 <b>KEY BISCAVNE FL</b> Zip 24 <b>33149</b> Country 25 <b>USA</b>		2a. Mailing Address 26 <b>200 OCEAN LANE DRIVE</b> Suite, Apt. #, etc. 27 <b>SUITE 1206</b> City & State 28 <b>KEY BISCAVNE FL</b> Zip 29 <b>33149</b> Country 30 <b>USA</b>		3. Date Incorporated or Qualified <b>12/13/1996</b>	
		4. FEI Number <b>65-0713186</b>		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**  
LANE, HOPE  
121 CRANDON BLVD. STE 359  
KEY BISCAVNE FL 33149

**10. Name and Address of New Registered Agent**

81 Name <b>Lane, Hope</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>200 Ocean Lane Drive, Suite 1206</b>
83
84 City <b>KEY BISCAVNE</b> FL 85 Zip Code <b>33149</b>

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]* DATE: **1/7/98**

**12. OFFICERS AND DIRECTORS**

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>LANE, HOPE</b>	
STREET ADDRESS	<b>121 CRANDON BLVD. STE 359</b>	
CITY-ST-ZIP	<b>KEY BISCAVNE FL 33149</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Lane, HOPE</b>	
1.3 STREET ADDRESS	<b>200 Ocean Lane Drive, Suite 1206</b>	
1.4 CITY-ST-ZIP	<b>KEY BISCAVNE FL 33149</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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.

SIGNATURE: *[Signature]* DATE: **1/7/98** **305 361 0481**

CP2E034 (10/97)