## 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 # P97000028141 (4)

NU HOME CONCEPTS, INC.

## **FILED** May 01 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			T TODINODI AND EDDIN INDIN ODDIN BOOKS BOOKS BOOKS FAIDT FIRST DEADL INDI 1884
P.O. BOX 2805 P.O. BOX 2805 LUTZ FL 33548-2805 LUTZ FL 33548-2805			<b>;</b>		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
Delnekoni Di	and of Dunings	2a. Mailing Address			03/25/1997
		26. Walling Address	poress		4. FEI Number 136667 Applied For Not Applied For
Suite, Apt.	#, stc.	Suite, Apt. #, et			\$8.75 Additional
27		27			5. Certificate of Status Desired Fee Required
City & State  City & State  28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country		Zip	· · · · · · · · · · · · · · · · · · ·		8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
KING, J. KEVIN 81 Name					
18712 HANNA ROAD			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)
LUTZ FL 33549					
			B	3	
			8	4 City	85 Zip Code
				_L	FL 6 250 COM
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					
40	Signature, typed or profied name of registered as	pert and libe if applicable	(NOTE: Registered A	igent signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D	DELET		- 1	Change Addition
NAME	HURRY, STU		1.2 NAM	- '- '-	
STREET ADDRESS	4224 STAFFORDSHIRE DRIV	F		ET ADDRESS	ZZA STAFFORDSHIPE DR.
CITY-ST-ZIP	LAKELAND FL 33809	•	1.4 CITY		AKETAND PL 338.00
TITLE	D	[] DELET			
NAME	KING, J. KEVIN		2.2 NAM		SIM, J. KEUN SIM, J. KEUN SIMON SINGER LANGING
STREET ADDRESS	18712 HANNA ROAD		2.3 STRE	ET ADDRESS	8712 HANNA RD
CITY-ST-ZIP	LUTZ FL 33549		2 4 C/D	-ST-ZIP	Urz, FL 33549
TITLE		DELET	E 3.1 TITLE		Change Addition
KAME	à		3.2 NAM	E	
STREET ADDRESS			3.3 STRE	ET ADDRESS	
CITY-ST-ZIP				-ST-ZIP	
TITLE		☐ DELET		1	Change Addition
NAME			4. 2 NAN		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP		DELE1	4.4 CiTY E 5.1 TiTLE		☐ Change ☐ Addition
TITLE		ال الالدا	5.1 IRES		
NAME STOCET ADDRESS				ET ADDRESS	
STREET ADORESS City-St-Zip			5,3 STRE 5,4 CITY	j	
TITLE		DELET			Change Addition
NAME		<u></u>	6.2 NAM	ì	
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			6.4 City		
	ertify that the information cumplied	with this filing does not au			n Section 119 07/3Vi). 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 by on an attachment with an address.