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 # P97000095410 (1)

NEW HOPE CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

FILED Apr 15 1998 8:00am Secretary of State



| 915 NORTH DIXIE HIGHWAY WEST PALM BEACH FL 33401 | | | 915 NORTH DIXIE HIGHWAY WEST PALM BEACH FL 33401 | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified | | |
|---|---------------------------------------|---|---|----------------|--|-----------------------|---------------|
| | | | | | 11/06/1997 | | |
| 2. Principal Place of Business | | 2a. Mailing Address | 2a. Mailing Address | | 4. FEI Number | [A] | oplied For |
| 21 | | 26 | | | 65-0793505 | N | ot Applicable |
| Sulte, Apt. #, etc. | | Suite, Apt. #, etc. | 27 | | 5. Certificate of Status Desired S8.75 Additional Fee Required | | |
| City & Stat | 28 | | | | Election Campaign Financing Trust Fund Contribution | | |
| Zip 24 | Country | Zip | Country | | 8. This corporation owes or has paid the current year Intangible | | |
| 24 | a Name and Address of Curr | | 30 | | Personal Property Tax due June 3 | |] No |
| Name and Address of Current Registered Agent SAFRAN, PAUL JR Name Name Name | | | | | | | |
| | 00 PGA BOULEVARD, SUITE 5 | ino | | | | | |
| PALM BEACH GARDENS FL 33410 | | | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable |)) | |
| | | | 83 | | | | |
| | | | 84 | City | | FL 85 Zip | Code |
| 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 | | | | | | | |
| 12. | | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICE | RS AND DIRECTOR | RS IN 12 |
| TITLE | | DELETE | 1.1 TITLE | P | | Change | ☐ Addition |
| NAME | Research Or other con- | | 1.2 NAME | E | EDWARD CARRELLI | | |
| STREET ADDRESS | | | 1.3 STREET AL | DDRESS 9 | 915 NORTH DIXIE HIGHWA | AY . | |
| CITY-ST-ZIP | | | 1.4 CITY-ST- | ZIP W | VEST PALM BEACH, FL. : | | |
| TITLE | | L DELETE | 2.1 TITLE | V | 7 | ☐ Change | Addition |
| NAME | | | 2.2 NAME | | EE SIIRA | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | 915 NORTH DIXIE HIGHWAY | | |
| CITY-ST-ZIP TITLE | | DELETE | 2.4 CITY-ST-ZIP 3.1 TITLE | | EST PALM BEACH, FL. | 33401 Change | ☐ Addition |
| NAME | | - VICETE | 3.2 NAME | | | ☐ Citalige | Addition |
| STREET ADDRESS | | | 3.3 STREET AC | DDRESS | | | |
| CITY-ST-ZIP | | | 3.4. CITY-ST- | | | | |
| TITLE | | DELETE | 4.1 TITLE | | | ☐ Change | Addition |
| NAME | | | 4. 2 NAME | | | | |
| STREET ADDRESS | | | 4.3 STREET AL | DDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST- | ZIP | ** *** | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | ļ | | ☐ Change | Addition |
| NAME | | | 5.2 NAME | ļ | | | • |
| STREET ADDRESS | | | 5.3 STREET AT | DORESS | | | |
| CITY-ST-ZIP | | DELCTE | 5.4 CITY-ST- | ZIP | | | 1 4.4 100 |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | ☐ Change | L_ Addition |
| NAME OTOTET ADDOCCO | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | 6.3 STREET AL | | | | Ì |
| CITY-ST-ZIP | certify that the information supplied | with this films does not qualify for | 6.4 CITY-ST | n stated in Se | ection 119.07(3)(i), Florida Statutes. I fu | ther certify that the | information |
| indicated | on this annual report or supplemen | ital annual report is true and accu | rate and that | my signature | shall have the same legal effect as if m | nade under oath: tha | atlam an I |
| Block 12 c | or Block 13 if changes, or han all | ceiver of trustee empowered to e lachment with an address. | XHCUIH IDIS FE | port as requir | red by Chapter 607, Florida Statutes; ar | id that my name ap | pears in |