

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY 24 AM 12:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name: **YOVANIS ENTERPRISES, INC.** DOCUMENT # **M 11080**

Mailing Address: **3100 Broadway
Riviera Beach, Fl 33404**
Principal Place of Business

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way line through incorrect information and enter correction below

3. Date incorporated or Qualified: **2-7-95** 3a. Date of Last Report: **1994-**

2. Mailing Address: **3100 Broadway** 2a. Principal Place of Business: **3100 Broadway**

4. FEI Number: **59-2636259** Applied For: Not Applicable:

22. Suite, Apt # etc: **Riviera Beach, FL 33404** 27. Suite, Apt # etc: **Riviera Beach, FL 33404**

5. Certificate of Status Desired: **\$8.75** 6. Election Campaign Financing Trust Fund Contribution:

23. City & State: **Riviera Beach, FL 33404** 28. City & State: **Riviera Beach, FL 33404**

7. Nonprofit Exempt from \$138.75 Supplemental Fee: \$5.00 May Be Added to Fees

24. Zip: **33404** 25. Country: **USA** 29. Zip: **33404** 30. Country: **USA**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

8. Name and Address of Current Registered Agent
**BASIL MARTOS
3301 Broadway
Riviera Beach, Fl 33404**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (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 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE: _____ DATE: _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

11. TITLE: **Pres.** 12. NAME: **CHRISTOS GIOVANIS**
13. STREET ADDRESS: **1241 Pine Point Rd.**
14. CITY - ST - ZIP: **Riviera Beach, Fl 33404**

21. TITLE: **Sec.** 22. NAME: **Luisa R. Bosso**
23. STREET ADDRESS: **2428 Broadway - Box 9936**
24. CITY - ST - ZIP: **Riviera beach, Fl 33419**

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY - ST - ZIP

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY - ST - ZIP

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY - ST - ZIP

61. TITLE
62. NAME
63. STREET ADDRESS
64. CITY - ST - ZIP

13. CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE
12. NAME
13. STREET ADDRESS
14. CITY - ST - ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY - ST - ZIP

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY - ST - ZIP

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY - ST - ZIP

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY - ST - ZIP

61. TITLE
62. NAME
63. STREET ADDRESS
64. CITY - ST - ZIP

5/24/95 MBT

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes, 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 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Luisa R. Bosso* Sec + Director 5-16-95 Date: *5/24/95* File # *7071514-0209*
Luisa R. Bosso (Signature and Typed or Printed Name of Signing Officer or Director) Date (Date of Signature)