

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000052726 (3)**

1. Corporation Name:  
**EVANS PETROLEUM SERVICES, INC.**



Principal Place of Business: **14301 S.W. 41ST STREET MIRAMAR FL 33027**  
Mailing Address: **14301 S.W. 41ST STREET MIRAMAR FL 33027**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	<b>2501 W. 80th Street</b>	26	<b>2501 W. 80th Street</b>	<b>07/10/1995</b>	<b>New - 7-10-95</b>
22. Suite, Apt. #, etc. <b>BAY #1</b>		27. Suite, Apt. #, etc. <b>BAY #1</b>		4. FEI Number	Applied For
23. City & State <b>Hialeah FL</b>		28. City & State <b>Hialeah FL</b>		<b>65-0592293</b>	Not Applicable
24. Zip	25. Country	29. Zip	30. Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>33016</b>	<b>USA</b>	<b>33016</b>	<b>USA</b>	6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
EVANS, WILLIAM S JR. 14301 S.W. 41ST STREET MIRAMAR FL 33027				10. Name and Address of New Registered Agent	
				81 Name <b>EVANS, William S. JR.</b>	
				82 Street Address (P.O. Box Number is Not Acceptable) <b>2501 W. 80th Street</b>	
				83 <b>BAY #1</b>	
				84 City <b>Hialeah</b>	85 Zip Code <b>FL 33016</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 female/wife, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature for the principal officer or director of the corporation)  
 (Signature for the registered agent or registered officer for the State)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<b>P/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>EVANS, WILLIAM S JR.</b>	1.2 NAME	<b>EVANS, William S. JR.</b>
STREET ADDRESS	<b>14301 S.W. 41ST STREET</b>	1.3 STREET ADDRESS	<b>2501 W. 80th Street</b>
CITY-STATE-ZIP	<b>MIRAMAR FL 33027</b>	1.4 CITY-STATE-ZIP	<b>Hialeah, FL 33016</b>
TITLE		2.1 TITLE	<b>V</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	<b>EVANS, William S. SR.</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>2501 W. 80th Street</b>
CITY-STATE-ZIP		2.4 CITY-STATE-ZIP	<b>Hialeah, FL 33016</b>
TITLE		3.1 TITLE	<b>S/T</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	<b>EVANS, Kimberly A.</b>
STREET ADDRESS		3.3 STREET ADDRESS	<b>2501 W. 80th Street</b>
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	<b>Hialeah, FL 33016</b>
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

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 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: *William S. Evans Sr.* **William S. EVANS SR.** 1-19-96 305-819-5030  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)