


1-28-98 B-0917 C-
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000052726 (3)
 1. Corporation Name
EVANS PETROLEUM SERVICES, INC.



Principal Place of Business 2501 W 80TH STREET BAY # 1 HIALEAH FL 33016 US	Mailing Address 2501 W. 80TH STREET BAY #1 HIALEAH FL 33016 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4960 E. 10th Court Suite, Apt. #, etc. 22 City & State 23 Hialeah, FL Zip 24 33013	2a. Mailing Address 26 4960 E. 10th Court Suite, Apt. #, etc. 27 City & State 28 Hialeah, FL Zip 29 33013	Country 25 US	Country 30 US
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3. Date Incorporated or Qualified 07/10/1995	4. FEI Number 65-0592293	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent EVANS, WILLIAM S JR. 2501 W. 80TH STREET BAY #1 HIALEAH FL 33016	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 4960 E. 10th Court 83 84 City Hialeah FL 85 Zip Code 33013
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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 _____ (NOTE: Registered Agent signature required when re-stating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME EVANS, WILLIAM S JR.	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 2501 W 80TH STREET	CITY-ST-ZIP HIALEAH FL	1.2 NAME	
TITLE V	NAME EVANS, WILLIAM S SR	1.3 STREET ADDRESS 4960 E. 10th Court	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 2501 W 80TH STREET	CITY-ST-ZIP HIALEAH FL	1.4 CITY-ST-ZIP Hialeah FL 33013	
TITLE ST	NAME EVANS, KIMBERLY A	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 2501 W 80TH STREET	CITY-ST-ZIP HIALEAH FL	2.2 NAME	
TITLE	NAME	2.3 STREET ADDRESS 4960 E. 10th Court	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	2.4 CITY-ST-ZIP Hialeah FL 33013	
TITLE	NAME	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	3.2 NAME	
TITLE	NAME	3.3 STREET ADDRESS 4960 E. 10th Court	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	3.4 CITY-ST-ZIP Hialeah FL 33013	
TITLE	NAME	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	4.2 NAME	
TITLE	NAME	4.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	6.2 NAME	
TITLE	NAME	6.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	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.

CR2E034 (10/97)