2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000091015

YOVAN'S CORPORATION

FILED Jan 12, 2007 08:00 AM **Secretary of State**

Principal Place of Business 8320 MENTIETH TER. MIAMI LAKES, FL 33016

Mailing Address

8320 MENTIETH TER. MIAMI LAKES, FL 33016



CR2E034 (11/05)

No Chg-P

01052007

DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0626411 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AMARO, TERESA DO NOT WRITE 8320 MENTIETH TER. MIAMI LAKES, FL 33016 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS AMARO, FLORENTINO E STREET ADDRESS 8320 MENTIETH TER. CITY-ST-ZIP MIAMI LAKES, FL 33016 UNDODOSSAGAS ST 01/ĬŽŽŐŽ–ŠŎÓŠŠ–012 150.00 AMARO, TERESA STREET ADDRESS 8320 MENTIETH TER. CITY-ST-7IP MIAMI LAKES, FL 33016 STREET ADDRESS DO NOT WRITE CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

10.

TITLE NAME

TITLE

NAME

TITLE NAME

TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

305-321-8529

IN THIS SPACE