

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

FILED
Jun 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1996	 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V43039 (9)
1. Corporation Name
EVENORTH INTERNATIONAL INC.



Principal Place of Business 210 FOUNTAINBLEAU BLVD. SUITE 300 MIAMI FL 33172	Mailing Address 1700 S. W. 57 AVENUE SUITE 214 MIAMI FL 33155 US
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3. Date Incorporated or Qualified 06/09/1992	3a. Date of Last Report 04/18/1995
4. FEI Number 65-0402687	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 has liability for intangible tax under s 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business	2a. Mailing Address 1790 WEST 49 ST
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc. # 217
23. City & State	28. City & State HALEAH FLORIDA
24. Zip	29. Zip 33012
25. Country	30. Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GONZALEZ, EVENCIO 210 FOUNTAINBLEAU BLVD SUITE 300 MIAMI FL 33172		EVENORTH INT'L, INC. 1790 West 49 Street, Suite 211 Hialeah, FL 33012 Tel: (305) 231-9957 • Fax (305) 231-9960	
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, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this 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 reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PD GONZALEZ, EVENCIO	1.2 NAME	
STREET ADDRESS	210 FOUNTAINBLEAU BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SD VIRGUEZ, RAFAEL	2.2 NAME	
STREET ADDRESS	10223 S.W. 28TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VPO GONZALEZ, TOMAS	3.2 NAME	
STREET ADDRESS	210 FOUNTAINBLEAU BLVD. AP3-3	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	20000221 1092
CITY-ST-ZIP		5.4 CITY-ST-ZIP	-06/13/97--01011--007
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

20000221 1092
-06/13/97--01011--007
***200.00

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6/19/97

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 _____ DATE **06/13/96**

CR2E034 (1-95)