

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042189

Entity Name: EVAN JONES STUDIOS, INC.

FILED
Apr 03, 2005
Secretary of State

Current Principal Place of Business:

16850-112 COLLINS AVE #133
SUNNY ISLES BEACH, FL 331604149

New Principal Place of Business:

Current Mailing Address:

16850-112 COLLINS AVE #133
SUNNY ISLES BEACH, FL 331604149

New Mailing Address:

FEI Number: 20-0836785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DADE COUNTY CORPORATE AGENTS, INC
18901 NE 29 AVE STE 100
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FOX, ROBERT
Address: 16850-112 COLLINS AVE #133
City-St-Zip: SUNNY ISLES BEACH, FL 331604149

Title: D () Delete
Name: FOX, HELENE
Address: 16850-112 COLLINS AVE #133
City-St-Zip: SUNNY ISLES BEACH, FL 331604149

Title: D () Delete
Name: JONES, EVAN
Address: 16850-112 COLLINS AVE #133
City-St-Zip: SUNNY ISLES BEACH, FL 331604149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT FOX

DR

04/03/2005

Electronic Signature of Signing Officer or Director

Date