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STREET ADDRESS CITY-ST-ZIP

## Jan 12, 2004 8:00 am 2004 FOR PROFIT CORPORATION **ANNUAL REPORT Secretary of State DOCUMENT # 488248** 01-12-2004 90002 026 \*\*\*158.75 1. Entity Name EVI 2, INC. Principal Place of Business Mailing Address 2105 DUNDEE RD. 6781 WINTERSOF GREDELY, RA4000625 2105 DUNDEE RD, GTBI WINTERSET P.O. BOX 9309 CTARDENS, RD. WINTER HAVEN, FL 3388 4369-4 P.O. BOX 9309-WINTER HAVEN, FL 33883-9909- 4 01052004 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1632398 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DARDEN, DOUGLAS M MR DO NOT WRITE 6781 WINTERSET GARDENS RD WINTER HAVEN, FL 33884 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. DOUGLAS M. DARDEN, ITEES FILE NOW!!! FEE IS \$150.00 April After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be MR TITLE NAME DARDEN, DOUGLAS M PRES 6781 WINTERSET GARDENS RD STREET ADDRESS WINTER HAVEN, FL 33884 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

12. 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 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.

**FILED**