

2000 UNIFORM BUSINESS REPORT (UBR)

1001037 1

DOCUMENT # A98000002698

1. Entity Name

EVANS FINANCIAL SERVICES, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN -6 PM 1:33

Principal Place of Business

612 S.E. 5TH AVENUE
FT. LAUDERDALE FL 33301

Mailing Address

612 S.E. 5TH AVENUE
FT. LAUDERDALE FL 33301-3142



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-888895

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DANIELS, NICHOLAS M ESQ.
C/O THERREL BAISDEN, P.A.
ONE S.E. 3RD AVE., SUITE 2400
MIAMI FL 33131

Name

EVANS JAMES D

Street Address (P.O. Box Number is Not Acceptable)

612 S.E. 5TH AVE #4

City

Ft Lauderdale FL

Zip Code

33301

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.

SIGNATURE

James D. Evans
Signature, typed or printed name of registered agent and title if applicable.

JAMES D. EVANS

4/28/00

DATE

(NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions
as Shown on record.

\$990.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12.

GENERAL PARTNER INFORMATION

13.

ADDRESS CHANGES ONLY

DOCUMENT #

P98000102243

NAME

EFS INVESTMENTS, INC.

STREET ADDRESS

612 S.E. 5TH AVENUE

CITY - ST - ZIP

FT. LAUDERDALE FL 33301

STREET ADDRESS

CITY - ST - ZIP

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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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: X

James D. Evans
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/28/00

954522-7770

Date

Daytime Phone #

CR2E003 (9/99)