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FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000004437 (6)

1. Corporation Name
EVANS GROUP, INC.

Principal Place of Business
110 SOCIAL HALL AVE.
SALT LAKE CITY UT 84111

Mailing Address
110 SOCIAL HALL AVE.
SALT LAKE CITY UT 84111



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/21/1997

4. FEI Number
87-0218260

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

WATSON, JEANEEN
4350 W. CYPRESS ST., #908
TAMPA FL 33607

10. Name and Address of New Registered Agent

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 the 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 Jeaneen Watson

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4-30-98

DATE

12. OFFICERS AND DIRECTORS

TITLE DCEO
NAME JOHNSON, JON
STREET ADDRESS 110 SOCIAL HALL AVE.
CITY-ST-ZIP SALT LAKE CITY UT 84111

TITLE DC
NAME BARTHOLOMEW, CHUCK
STREET ADDRESS 1050 17TH ST #700
CITY-ST-ZIP DENVER CO 80202

TITLE VD
NAME MOGELGAARD, MIKE
STREET ADDRESS 190 QUEEN ANNE N.
CITY-ST-ZIP SEATTLE WA 98109

TITLE PD
NAME DEULOFEU, JULIO
STREET ADDRESS 160 PACIFIC AVE., #200
CITY-ST-ZIP SAN FRANCISCO CA 94111

TITLE PD
NAME FLOATHE, MAURY
STREET ADDRESS 190 QUEEN ANNE N.
CITY-ST-ZIP SEATTLE WA 98109

TITLE PD
NAME HOPSON, ANDY
STREET ADDRESS 190 QUEEN ANNE N.
CITY-ST-ZIP SEATTLE WA 98109

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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: [Signature]

CF2E034 (10/97)