

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G80378 (4)

1. Corporation Name
EVELYN & ARTHUR, INC.



Principal Place of Business 100 NORTH COUNTY ROAD PALM BEACH FL 33480	Mailing Address 100 NORTH COUNTY ROAD PALM BEACH FL 33480
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/26/1984	
21. Suite, Apt. #, etc.	22. City & State	23. Zip	24. Country	4. FEI Number 59-2398038	Applied For <input type="checkbox"/> Not Applicable
25. Country	26. Suite, Apt. #, etc.	27. City & State	28. Zip	29. Country	30. Country
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	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent LEWIS, ARTHUR 3170 S OCEAN BLVD #205-S PALM BEACH FL 33480				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D <input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEWIS, ARTHUR		1.2 NAME		
STREET ADDRESS	3170 S OCEAN BLVD #205-S		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH FL		1.4 CITY-ST-ZIP		
TITLE	D <input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEWIS, EVELYN		2.2 NAME		
STREET ADDRESS	3170 S OCEAN BLVD #205-S		2.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH FL		2.4 CITY-ST-ZIP		
TITLE	S <input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WEISSMAN, ADRIANNE		3.2 NAME		
STREET ADDRESS	1043 SHADY LAKES CIR.		3.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BCH.GARDENS FL		3.4 CITY-ST-ZIP		
TITLE	VP <input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WEISSMAN, FREDRIC		4.2 NAME		
STREET ADDRESS	1043 SHADY LAKES CIR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BCH.GARDENS FL		4.4 CITY-ST-ZIP		
TITLE	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			5.2 NAME	VICE PRESIDENT	
STREET ADDRESS			5.3 STREET ADDRESS	MITCHELL LEWIS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	6687 NEWPORT LAKE CIR. BOCA RATON, FL 33496	
TITLE	<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			6.2 NAME	VICE PRESIDENT	
STREET ADDRESS			6.3 STREET ADDRESS	JAYNE LEWIS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	6687 NEWPORT LAKE CIR. BOCA RATON, FL 33496	

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: *Arthur Lewis*

CR2E034 (10/97)