

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY 11 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K67298

(5)

1. Corporation Name

REVELS ENTERPRISES, INCORPORATED

Principal Place of Business

C/O KARLOS REVELS
4151 WOODVILLE HIGHWAY
TALLAHASSEE FL 32311-7464

Mailing Address

C/O KARLOS REVELS
4151 WOODVILLE HIGHWAY
TALLAHASSEE FL 32311-7464

(Printed by filer, if this space)

3. Date the corporation was organized

02/21/1989

3a. Date of Last Report

02/14/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FIC Number

59-2542977

Applied For

Not Applicable

State Apt # etc

22

State Apt # etc

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Year

24

Month

25

Year

29

County

30

8. This corporation has liability for contribution under Chapter 10,
Florida Statutes: ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BLACKWELL, JOHN L.
481 OLD DIRT ROAD
TALLAHASSEE FL 32311

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Applicable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.06(2) and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of having 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 obligation of Section 607.06(2), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent's Representative)

(Signature of Registered Agent or Registered Agent's Representative)

(Date)

12. OFFICERS AND DIRECTORS

12a.

NAME

STREET ADDRESS

CITY, STATE, ZIP

D
REVELS, KARLOS
4151 WOODVILLE HWY
TALLAHASSEE FL

12b.

NAME

STREET ADDRESS

CITY, STATE, ZIP

S
REVELS, JESSIE T.
1382 BALKIN ROAD
TALLAHASSEE FL

12c.

NAME

STREET ADDRESS

CITY, STATE, ZIP

M
MILLER, TERRY
4151 WOODVILLE HWY
TALLAHASSEE FL

12d.

NAME

STREET ADDRESS

CITY, STATE, ZIP

12e.

NAME

STREET ADDRESS

CITY, STATE, ZIP

12f.

NAME

STREET ADDRESS

CITY, STATE, ZIP

4-26130

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

13a.

NAME

STREET ADDRESS

CITY, STATE, ZIP

☐ Change ☐ Addition

13b.

NAME

STREET ADDRESS

CITY, STATE, ZIP

☐ Change ☐ Addition

13c.

NAME

STREET ADDRESS

CITY, STATE, ZIP

☐ Change ☐ Addition

13d.

NAME

STREET ADDRESS

CITY, STATE, ZIP

☐ Change ☐ Addition

13e.

NAME

STREET ADDRESS

CITY, STATE, ZIP

☐ Change ☐ Addition

13f.

NAME

STREET ADDRESS

CITY, STATE, ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.02, 199.03, Florida Statutes. I further certify that the information included on this form is true and correct and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the person or persons authorized to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13, whichever is applicable, with an address.

SIGNATURE:

KARLOS REVELS, Owner/Operator

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/7/95

877 2082