

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # L69350 (1)

1. Corporation Name

EVREKIAN INVESTMENT CORPORATION

95 MAY -1 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**1307 GULF WAY
PASS-A-GRILLE
ST. PETERSBURG FL 33706**

Mailing Address

**1307 GULF WAY
PASS-A-GRILLE
ST. PETERSBURG FL 33706**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/01/1990

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3018238

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 has liability for intangible tax under S. 199.032,
Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Country

24

Country

25

Zip

26

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

**EVRIKOZ, TAKVOR
1307 GULF WAY, PASS-A-GRILLE
ST. PETE BEACH FL 33708**

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

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

(NOTE: Registered Agent signature required when registering.)

(DATE)

12. OFFICERS AND DIRECTORS

111 TITLE

112 NAME

113 STREET ADDRESS

114 CITY, ST, ZIP

**PST
EVRIKOZ, TAKVOR
1307 GULF WAY
ST PETERSBURG BCH FL**

115 TITLE

116 NAME

117 STREET ADDRESS

118 CITY, ST, ZIP

**VDC
EVRIKOZ, TAKVOR
1307 GULF WAY
ST PETERSBURG BCH FL**

119 TITLE

120 NAME

121 STREET ADDRESS

122 CITY, ST, ZIP

123 TITLE

124 NAME

125 STREET ADDRESS

126 CITY, ST, ZIP

127 TITLE

128 NAME

129 STREET ADDRESS

130 CITY, ST, ZIP

131 TITLE

132 NAME

133 STREET ADDRESS

134 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

131 TITLE

132 NAME

133 STREET ADDRESS

134 CITY, ST, ZIP

☐ Change ☐ Addition

211 TITLE

212 NAME

213 STREET ADDRESS

214 CITY, ST, ZIP

☐ Change ☐ Addition

311 TITLE

312 NAME

313 STREET ADDRESS

314 CITY, ST, ZIP

☐ Change ☐ Addition

411 TITLE

412 NAME

413 STREET ADDRESS

414 CITY, ST, ZIP

☐ Change ☐ Addition

511 TITLE

512 NAME

513 STREET ADDRESS

514 CITY, ST, ZIP

☐ Change ☐ Addition

611 TITLE

612 NAME

613 STREET ADDRESS

614 CITY, ST, ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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 attached to, or on an attachment with an address.

SIGNATURE:

(Signature)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR/28/1995

367/655