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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	590 5NT "   60250							
OCUMI Corporation Na		, (1)						
EVREKIAN	N INVESTMENT CORPOR	ATION						
ncipal Place of I	Business	Mailing Address				A ELI SIALI AINII A	1011 61811 611	ais vivil 1881
307 GULF WAY		1307 GULF WAY						
PASS-A-GRILLE PASS-A-GRILLE								
t. Petersbur	RG FL 33706	ST. PETERSBURG FL 3	3706		3. Date Incorporated or Qualified	3a. Date o	f Last Rep 01/1995	
					05/01/1990 4. FEI Number	1 00/		optied For
Principal Place	of Business	2a. Mailing Address					ot Applicable	
Suite, Apt. #, e	elc.	Suite, Apt. #, etc.		5 Codificate of Status Desired C			Additional	
		27			S, Contineate of Glates Desired			equired
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
	Country	28 Zip	Country	······································	This corporation has liability for	intangible tax		
Zip	25	29	30		Florida Statutes Yes No			
	9. Name and Address of Curren			T	10. Name and Address of New F	legistered A	jent	
			81	Name				
EVRIKOZ,			82 Street Add		ress (P.O. Box Number is Not Acceptat	(ek		
	F WAY, PASS-A-GRILLE					· · · · · · · · · · · · · · · · · · ·		
SI. PEIE	BEACH FL 33706							
			84	City		FL	85 Zip	Code
. Pursuant to f	the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above-	named corpor	ration submits this statement for the pu	rpose of chan	ging its re	gistered offic
or registered	l agent, or both, in the State of Florid and accept the obligations of, Secti	da. Such change was authoriz	ed by the cond	poration's boa	rd of directors. I hereby accept the app	iointment as n	agistereu a	agent. i ain
SNATHRE								
Sej	makine, typical or printed name of registered agent.	and title if applicable (NO DIDIRECTORS	13.	nt signature require	ad when reinstating)  ADDITIONS/CHANGES TO OFF	DATE FICERS AND I	DIRECTOR	3S IN 12
!	PST	DELETE	1. 1 TITLE		Applicate of a financial state of a second		Change	Addition
ME	EVRIKOZ, TAKVOR		1.2 NAME					
REEL ADDRESS	1307 GULF WAY		1.3 STREE	T ADDRESS				
Y - S1 - ZiP	ST PETERSBURG BCH FL			\$1-2IP			Change	Addition
(f	VDC EVRIKOZ, TAKVOR	DELETE	2 1 1111 F	i			Change	☐ ×odition
ME	1307 GULF WAY		2.2 NAME	I ADDRESS				
REET ADDRESS	ST PETERSBURG BCH FL		2 4 GiTY-					
Y-SI-ZIP		☐ DELETE	3 1 TITLE				] Change	Addition
ME			3 2 NAME					
RELI ADDRESS				ET ADDRESS				
Y-S1-719		F) pc, rrc	34 CITY-			<del></del>	] Change	☐ Addition
ti .ur		☐ DELETE	4. 1 TiTLE 4.2 NAME			<u> </u>	,	
MF BELL ANNOESS				ET ADDRESS				•
REEL ADDRESS TY: ST: ZIP			4.4 CITY -					
ILF		DELETE	5 1 TITLE			С	Change	Addition
MME .			5.2 NAME	E.				
REFT ADOPESS				ET ADDRESS				
TY-ST-ZIP		C) DELETE	5 4 CITY -			г	Change	☐ Addition
11 F		☐ DELETE	6 1 TITLE 6 2 NAME			L	J	
AME				ì				
re 01 7/0			6.4 C(TY-	- ST - ZIP				
4. I do hereby	certify that the information supplied	I with this filing is voluntarily fur	nished and do	es not qualify	for the exemption stated in Section 11	9.07(3)(k), Flo	rida Statut	es. I further
IFEET ADDRESS ITY-ST-ZIP  4. I do hereby	certify that the information supplied the information indicated on this am am an officer or director of the corp Block 12 or Block 13 if changed, or	I with this filing is voluntarily fur nual report or supplemental an paration or the receiver or trust of an attachment with an ad-	63 STREI 64 CITY- mished and do	FF ADDRESS -ST-ZIP bes not qualify	for the exemption stated in Section 11 rate and that my signature shall have th his report as required by Chapter 607,	9.07(3)(k), Flo ne same legal Florida Statute	rida Statut effect as if es; and the	fe

SIGNATURE:

SAN/15/1996 8/3-367-1655