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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	00 W. 19	DIVISION	OF CORPORATIONS			
DOCU 1. Corporatio	MENT # L	78720	(4	!)			
	EV ENTERPRISES, IN	NC.	•	•			
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Principal Place	of Business		Mailing Address				
5379 W. ATLANTIC BLVD		5379 W. ATLANTIC BLVD					
MARGATE	FL 33063		MARGATE FL 33				
					3. Date incorporated or Qualified	3a. Date of Last	
	ace of Business	28	. Mailing Address		06/08/1990 4. FEI Number	07/25	
Suite, Apt.	4 ata	26	237/1	NYER WOOD DR	65-0199821	-	Applied For Not Applicable
Suite, Apr.	#, etc.	27	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.7	75 Additional
City & State		- 2"	City & State			Fe	e Required
7:0		28	ACWOR	TH GA	Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip 1	Country 25		Zip Znlnl	Country	B. This corporation has liability for	intangible tax under	s 199.032
J	9. Name and Address of	29 Current Regis	30101	30 USA	Florida Statutes Yes	⊠ No	
			- Agont	81 Name	10. Name and Address of New R	legistered Agent	
KATZ,		ì					
	S.W. 55TH AVE			82 Street Addr	ess (P.O. Box Number is Not Acceptab	le)	· · · · · · · · · · · · · · · · · · ·
BOCA	RATON FL 33433	:		83			
				84 City			
	the provisions of Sections (07.05.00		1		FL 85 2	Ip Code
 Pursuant to 							
Pursuant to or registere familiar with	d agent, or both, in the State	of Finda	7.1508, Florida Stat Lchange was autho	utes, the above-named corpora	ation submits this statement for the purport of directors. I berefy account the	pose of changing its	registered offic
or registere familiar with	d agent, or both, in the State , and accept the obligations	of Florida Sich	7.1508, Florida Stat Change was autho 0505, Florida Statut	tutes, the above-named corpora rized by the corporation's boardes.	ation submits this statement for the purp d of directors. I hereby accept the appo	pose of changing its pintment as registere	registered offici d agent. I am
GNATURE _	d agent, or both, in the Stati , and accept the obligations greature typed or printed name of regis				ation submits this statement for the purp d of directors. I hereby accept the appo	pose of changing its bintment as registere	registered offic d agent. I am
2.	ignature, typed or printed name of regis		arplicable. (utes, the above-named corporatized by the corporation's boardes. NOTE: Registered Agent signature required 13.	d when reinstating)	9-1-90 DATE	<u> </u>
2.	ograture typical or printed name of regis OFFIC	lured agent of tile if a	applicable. (NOTE: Registered Agent signature required		9-1-90 DATE	ORS IN 12
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR