

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90297 032 ***150.00

DOCUMENT # P02000062854

1. Entity Name
EVB ENTERPRISES INC.



Principal Place of Business
**12639 GLENNA AVENUE
TAMPA FL 33635**

Mailing Address
**12639 GLENNA AVENUE
TAMPA FL 33635**

11019669



2. Principal Place of Business
809 E. BLOOMINGDALE
Suite, Apt. #, etc.
#390

3. Mailing Address
809 E. BLOOMINGDALE
Suite, Apt. #, etc.
#390

☐ CHECK HERE IF MAKING CHANGES

City & State
BRANDON, FL

City & State
BRANDON, FL

4. FEI Number
02-0630220

Applied For
☐ Not Applicable

Zip Country
33511 USA

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33511 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BLACKMAN, EARNEST V. JR.
12639 GLENNA AVENUE
TAMPA FL 33635

7. Name and Address of New Registered Agent

Name
EARNEST V. BLACKMAN, JR.
Street Address (P.O. Box Number is Not Acceptable)
809 E. BLOOMINGDALE #390
City
BRANDON FL Zip Code
33511

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **EARNEST V. BLACKMAN, JR.** **4/23/03**
DIRECTOR
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DIRECTOR** ☐ Delete
NAME **EARNEST V. BLACKMAN, JR.**
STREET ADDRESS **809 E. BLOOMINGDALE #390**
CITY-ST-ZIP **BRANDON, FL 33511**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **EARNEST V. BLACKMAN, JR.** **4/23/03** **813 330 1292**
DIRECTOR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0470950 AV

CR2E034 (10/02)