## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000089862

Entity Name: EVERGRACE, INC.

FILED Jan 29, 2007 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
37050 SW 2 HOMESTE	207 AVE AD, FL 33033	3		296 STREET AD, FL 3303		
Current Ma	ailing Addres	s:	New Mailin	New Mailing Address:		
15900 S.W. HOMESTE	283 ST. AD, FL 33033	3	16460 SW 2 HOMESTE	299 DRIVE AD, FL 3303	3	
FEI Number:	56-2288977	FEI Number Applied For ( )	El Number Not Appli	cable ( )	Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:	
GOLBURGI 11951 S.W. MIAMI, FL	123 AVENUE	≣	16460 SW 2	GOLBURGH, MARIA T 16460 SW 299 DRIVE HOMESTEAD, FL 33033 US		
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.						
SIGNATURE: MARIA T. GOLBURGH				01/29/2007		
Electronic Signature of Registered Agent					Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS	AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ) GUEVARA, EDV 15900 SW 283 HOMESTEAD, I	ST	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ) GUEVARA, TER 15900 S.W. 29 HOMESTEAD, I	5 TERRACE	Title: Name: Address: City-St-Zip:	D (X GUEVARA, TE 21305 SW 296 HOMESTEAD,	STREET	
Title: Name: Address: City-St-Zip:	S () GOLBURGH, M 11951 S.W. 12 MIAMI, FL 331	3 AVENUE	Title: Name: Address: City-St-Zip:	S (X GOLBURGH, M 16460 SW 299 HOMESTEAD,	9 DRIVE	
Title: Name: Address: City-St-Zip:	T () CORDOVA, DU 30111 S.W. 15 HOMESTEAD, I	1 AVENUE	Title: Name: Address: City-St-Zip:	T (X CORDOVA, DU 18695 SW 266 HOMESTEAD,	STREET	
Title: Name: Address: City-St-Zip:	V () GUEVARA, J. O 1615 S.W. 8TH HOMESTEAD, I	STREET	Title: Name: Address: City-St-Zip:	V (X GUEVARA, J. 0 21305 SW 296 HOMESTEAD,	STREET	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA T. GOLBURGH S 01/29/2007