

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 11, 2008 08:00 A
Secretary of State

DOCUMENT # P03000150675

1. Entity Name
EVERITE PRODUCTS, INC.



Principal Place of Business
**4647 MILLSTATION PLACE
JACKSONVILLE, FL 32257**

Mailing Address
**4647 MILLSTATION PLACE
JACKSONVILLE, FL 32257**



02252008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0537789

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**TSAI, CHUN HSIEN
4647 MILLSTATION PLACE
JACKSONVILLE, FL 32257**

**DO NOT WRITE
IN THIS SPACE**

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

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U000000854379
03/27/08-80006-002 150.00**

10. OFFICERS AND DIRECTORS

TITLE	P/D
NAME	TSAI, CHUN HSIEN
STREET ADDRESS	4647 MILLSTATION PLACE
CITY- ST- ZIP	JACKSONVILLE, FL 32257
TITLE	D
NAME	WU, CHIA CHUAN
STREET ADDRESS	4647 MILLSTATION PLACE
CITY- ST- ZIP	JACKSONVILLE, FL 32257
TITLE	D
NAME	CHEN, SHIRLEY H
STREET ADDRESS	3683 WESTOVER RD
CITY- ST- ZIP	ORANGE PARK, FL 32003
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *X Chun Hsien Tsa*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/03/08

Date

Daytime Phone #