
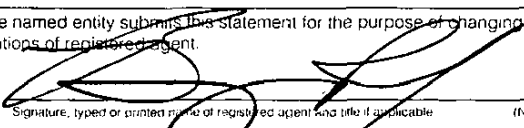


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 07, 2007 8:00 am**  
**Secretary of State**

08-07-2007 90028 021 \*\*\*150.00

DOCUMENT # P04000148668																											
1. Entity Name EVOLUTION OUTDOOR INC.																											
Principal Place of Business 630 HENLEY DRIVE NAPLES FL 34104		Mailing Address 630 HENLEY DRIVE NAPLES FL 34104																									
2. Principal Place of Business - No P.O. Box # 630 Henley drv Suite, Apt. #, etc.		3. Mailing Address 630 Henley drv Suite, Apt. #, etc.																									
City & State Naples, Florida Zip 34104 Country USA		City & State Naples, Florida Zip 34104 Country USA																									
4. FEI Number 20-1790997		Applied For Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent PAUL, BARRY L 630 HENLEY DRIVE NAPLES FL 34104		7. Name and Address of New Registered Agent Name: Paul, Barry L Street Address (P.O. Box Number is Not Acceptable) 630 Henley Drv City: Naples FL Zip Code: 34104																									
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:  DATE: 8/2/07 (NOTE: Registered Agent signature required when reinstating)																											
FILE NOW!!! FEE IS \$550.00 DUE BY September 5, 2007 Make Check Payable to Florida Department of State		S 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input type="checkbox"/>																									
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1:																									
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Barry Paul

8/2/07

239-947-4944

Date

Daytime Phone #

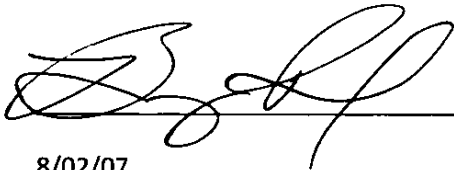
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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.

ATTACHMENT 40128480

# P04 000148668

This letter is to attest to the fact that I Barry Paul, president of ( evolution outdoor inc ) did not receive the AR

Therefore was unaware of its status. Only when the notice of dissolve came in the mail, did it come to my attention that it had not been delivered.



8/02/07

8/02/07

Evolution outdoor, inc.