


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # P06000038569 1. Entity Name EVD ENTERPRISE INC.	
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Principal Place of Business 3810 SW 108TH AVE., UNIT 5 MIAMI, FL 33165	Mailing Address 3810 SW 108TH AVE., UNIT 5 MIAMI, FL 33165
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DO NOT WRITE IN THIS SPACE



04092008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-4826946	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

DELGADO, ROSA
3810 SW 108TH AVE., UNIT 5
MIAMI, FL 33165

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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 re-registering)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	04/24/08-80025-009 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DELGADO, ROSA 3810 SW 108TH AVE., UNIT 5 MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DELGADO, LUIS 3810 SW 108TH AVE., UNIT 5 MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GONZALEZ, GRACE D 3810 SW 108TH AVE., UNIT 5 MIAMI, FL 33165
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Rosa Delgado 4-10-08/205 485-1330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #