## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P94000021977 (1) **DOCUMENT #** 1. Corporation Name EREV, INC. Mailing Address Principal Place of Business 1858 RINGLING BLVD. 1858 RINGLING BLVD. SARASOTA FL 34236 SARASOTA FL 34236 2. Principal Place of Business 2a. Mailing Address 26 21 Suite, Apt. #, etc Suite, Apt. #, etc 27 22 City & State City & State 28 23 Ζıρ Country  $Z_{\rm IP}$ 20 [3n]



3. Date Incorporated or Qualified 03/22/1994

65-0485568

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

3a. Date of Last Report

03/21/1995

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

23											
Zip	Country Zip		<u></u> ⊢1	Country		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes X Yes □ No					
24	25		29	Annal Annal	<u> 30 </u>			10. Name and Address of New			
	9. Name and A	ddress of Curren	it Hegisti	ereo Agent		31	Name	ig, italic alla Addicas of Nov.	- Trogistor		
GEBHARD, H. DIETER 1858 RINGLING BLVD. SARASOTA FL 34236											
							82 Street Address (P.O. Box Number is Not Acceptable)				
SARASU	JIA FL 34230					83					
					[+	84	City		F	=L  85   Z <sub>1</sub>	o Code
or registers	ad agont or both i	n the State of Flori	da Such	7,1508, Florida Statut change was authoriz 0505, Florida Statutes	rea by the co	1 . e-na orpo	amed co ration's	poration submits this statement for the popular of directors. Thereby accept the a	surpose of appointmen	f changing its r it as registered	egistered office agent. I am
SIGNATURE.	Signature typed or printed	name of registered agent	and title if a	gydigat de (NE		Agieni!	suprature re	epared who interest angle	DAT		ESC IN 10
12.		OFFICERS AN	D DIREC		13.			ADDITIONS/CHANGES TO C			XX Addition
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CITY-SI-2IP	y codify that the in	formation supplied	with this	filino is voluntarily fur	mished and	does	s not au	alify for the exemption stated in Section 1	19.07(3)(4	(), Florida Statu	ites. I further

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made undo ath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed are on an attachment with in address.

SIGNATURE:

V 2 | 14 | 94 V (941) 365-4617