## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

704 SWEETWATER BLVD. 704 SWEETWATER BLVD. N.

LONGWOOD FL 32779-2444

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 24 1997 8:00am

Secretary of State

3a. Date of Last Report

04/24/1996

(407)

3. Date Incorporated or Qualified

03/21/1994

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000022474 (8)

## AREVLIS, INCORPORATED

Principal Place of Business

704 SWEETWATER BLVD. N.

LONGWOOD FL 32779

2. Principal F	lace of Business	2a. Mailing Addres	2a. Mailing Address			4. FEI Number	Ar	plied For	
1		26	26			59-3228117	No	ot Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, et	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional	
22		27	27			5. Certificate of Status Desired	Fee Re	equired	
City & State City & State						6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added t	to Fees	
Zιρ	Country	Zip	Cou			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 30			Florida Statutes  Yes  No					
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
704 SWEETWATER BLVD. N. LONGWOOD FL 32779					81 Name				
					82 Street Address (P.O. Box Number is Not Acceptable)				
					83				
·				84	City		85 Zip (	Code	
						FL			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab					-named corpo	pration submits this statement for the purpose of o	hanging it	ts registered	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
	Signature typed or printed name of registered a			Ager	nt signature required				
12.	OFFICERS AI	ND DIRECTORS	13.		<del> </del>	ADDITIONS/CHANGES TO OFFICERS AND			
TILE	D DELETE		1.1 TIT	1.1 TITLE		ι	Change	Addition	
NAME	SILVERA, DERRICK P			1.2 NAME					
STREET ADDRESS	1			1.3 STREET ADDRESS					
CITY - \$1 - ZiP				TY - ST	-ZIP				
TITLE	D DELETE			2.1 TITLE			Change	Addition	
NAME	SILVERA, THERESA L	2.2 NA	ME						
STREET ADDRESS	704 SWEETWATER BLVD. N.		2.3 ST	REET A	address				
CITY-S1-ZIP				TY-SI	T-ZIP				
TITLE		DELE	TE 3.1 711	LE		[	Change	Addition	
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 \$T	AEET A	address				
CITY - \$1 - 7IP			3 4. Ci	TY - \$1	T-ZIP				
1HLE	1	☐ DELE	TE 4.1 TH	LE		[	Change	Addition	
NAME	1		4.2 N/	AME					
STREET ADDRESS			4.3 ST	AEET #	address				
CITY+\$1+ZIP			4.4 CiT		- ZIP				
THE		DELE	TE 5.1 TIT	LE		l	Change	Addition	
NAME			5.2 NA	ME					
STREET ADDRESS	Í		5.3 ST	REET #	ADDRESS				
CITY-ST-ZIP		54 C			-ZIP		<u> </u>		
THLE		DELETE 617		LE			Change	Addition	
NAME			62 NA	ME					
STREET ADDRESS	63 5			AEET A	address				
CITY+ST-ZIP			6.4 Cr					***************************************	
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 legal effect as if made under oath; that									
I an an officer of the bright proportion of the receiver of th									
appears in Block 12 or Block Nift changed, or on an attachment with an address.									