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FILED  
Apr 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000034190 (6)

1. Corporation Name

EVENSON CONSTRUCTION, INC.

Principal Place of Business

4002 DEL RIO WAY  
SUNRISE FL 33351

Mailing Address

4002 DEL RIO WAY  
SUNRISE FL 33351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/02/1994

4. FEI Number

65-0492077

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 4645 NW 113 Terrace

Suite, Apt. #, etc.

22 City & State  
23 Sunrise, FL

24 33323

Country

2a. Mailing Address

26 4645 NW 113 Terrace

Suite, Apt. #, etc.

27 City & State  
28 Sunrise, FL

29 33323

Country

9. Name and Address of Current Registered Agent

EVENSON, JOHN  
4002 DEL RIO WAY  
SUNRISE FL 33351

10. Name and Address of New Registered Agent

81 Name Evenson, John

82 Street Address (P.O. Box Number is Not Acceptable)

4645 NW 113 Terrace

83

84 City Sunrise

FL

85 Zip Code

33323

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PSD  
STREET ADDRESS EVENSON, JOHN  
CITY-ST-ZIP 4002 DEL RIO WAY  
SUNRISE FL 33351

TITLE ☐ DELETE

NAME VTD  
STREET ADDRESS EVENSON, STACY  
CITY-ST-ZIP 4002 DEL RIO WAY  
SUNRISE FL 33351

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME PSD  
1.3 STREET ADDRESS EVENSON, JOHN  
1.4 CITY-ST-ZIP 4645 NW 113 Terrace  
Sunrise, FL 33323

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME VTD  
2.3 STREET ADDRESS EVENSON, STACY  
2.4 CITY-ST-ZIP 4645 NW 113 Terrace  
Sunrise, FL 33323

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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 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 12 or Block 13 if changed, or on the attachment with my address.

SIGNATURE:

Handwritten signature: John A. Evenson, V. Pres.

2-24-98 (954) 572-5651

CP2E034 (10/97)