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FILED

Feb 10 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000039099 (4)

1. Corporation Name

EGVG ENTERPRISES, INC.



Principal Place of Business

71 HAVEN DRIVE  
W. MELBOURNE FL 32904

Mailing Address

71 HAVEN DRIVE  
W. MELBOURNE FL 32904-4837

3. Date Incorporated or Qualified  
05/20/1994

3a. Date of Last Report  
03/29/1996

2. Principal Place of Business

21 241 AVENIDA DE LA VISTA

2a. Mailing Address

26 1900 S. HARBOR CITY BD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27 302

City & State

City & State

23 INDIAN LANTIC FL

28 MELBOURNE FL

Zip

Country

Zip

Country

24 32903

25 U.S.A.

29 32907

30 U.S.A.

9. Name and Address of Current Registered Agent

VILLALOBOS, ERICK  
1407 ATLANTIC AVE  
MELBOURNE BEACH FL 32951

10. Name and Address of New Registered Agent

81 Name

VILLALOBOS, ERICK

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

241 AVENIDA DE LA VISTA

83

84

INDIAN LANTIC

FL

85

Zip Code

32903

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 D ☐ DELETE

NAME VILLALOBOS, ERICK  
STREET ADDRESS 71 HAVEN DR.  
CITY-ST-ZIP W. MELBOURNE FL 32904

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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STREET ADDRESS

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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 VELLA

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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 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 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 an attachment with an address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 2-4-97

Date

Daytime Phone #

CR2E034 (9/96)