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Jan 15 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 # P94000088197 (6)

1. Corporation Name
EVERGREEN INVESTMENTS, INC.



Principal Place of Business

2519 MCMULLEN BOSTON RD
#510-228
CLEARWATER FL 34621
US

Mailing Address

2519 MCMULLEN BOSTON RD
#510-228
CLEARWATER FL 34621
US

3. Date Incorporated or Qualified

12/05/1994

3a. Date of Last Report

03/01/1996

2. Principal Place of Business

21 13129 N 19th St.
Suite, Apt. #, etc.

22 Tampa, FL
City & State

23
City & State

24 33612 25 USA
Zip Country

2a. Mailing Address

26 2519 McMullen Booth Rd
Suite, Apt. #, etc.

27 #510-228
City & State

28 Clearwater, FL
City & State

29 34621 30 USA
Zip Country

4. FEI Number

59-3287793

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

NOEL, JERRY
2451 MCMULLEN BOOTH RD.
STE 252
CLEARWATER FL 34619

10. Name and Address of New Registered Agent

81 Name

NOEL, Jerry

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

Suite 510-228

83

2519 McMullen Booth Rd.

84

Clearwater

FL

85

Zip Code

34621

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, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME NOEL, JERRY
STREET ADDRESS 2451 MCMULLEN BOOTH RD STE 252
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ DELETE

NAME GONZALEZ, ERNESTO P
STREET ADDRESS 3137 OLD POST DR
CITY-ST-ZIP BALTIMORE MD 21208

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 D ☐ Change ☐ Addition

1.2 NAME D Noel, Jerry
1.3 STREET ADDRESS Suite 510-228
1.4 CITY-ST-ZIP 2519 McMullen Booth Rd.
Clearwater, FL 34621

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP 21208

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:

Jerry Noel, President

1/19/97 813-890526

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0526137

CR2E004 (9/96)