

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000032364 (8)**

1. Corporation Name

EVELYN PAUL INTERNATIONAL, INC.



Principal Place of Business

6223 BAY CLUB DRIVE
BUILDING #2
FT. LAUDERDALE FL 33308

Mailing Address

6223 BAY CLUB DRIVE
BUILDING #2
FT. LAUDERDALE FL 33308

3. Date Incorporated or Qualified

04/21/1995

3a. Date of Last Report

2. Principal Place of Business

21 6507 BAY CLUB DRIVE

Suite, Apt. #, etc.

22 BLDG. 19#3

City & State

23 FORT LAUDERDALE

Zip

24 FL. 33308

Country

25 USA

2a. Mailing Address

26 6507 BAY CLUB DRIVE

Suite, Apt. #, etc.

27 BLDG 19 #3

City & State

28 FORT LAUDERDALE

Zip

29 FL. 83308

Country

30 USA

4. FEI Number

65-05-78-300

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

PAUL, EVELYN
6223 BAY CLUB DRIVE
BUILDING #2
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 the applicant

NOTE: Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE: D
NAME: PAUL-JARPESTAM, EVELYN
STREET ADDRESS: 6223 BAY CLUB DRIVE, BUILDING #2
CITY-ST-ZIP: FT. LAUDERDALE FL 33308

TITLE: [] DELETE
NAME: []
STREET ADDRESS: []
CITY-ST-ZIP: []

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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: []
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 to an addendum.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EVELYN PAUL-JARPESTAM

4/20/96 (954) 489-3031

CR2E034 (12/95)