POCQUIMENT # P95000057441 (4) EVALA PUBLICATIONS, INC. Principal Place of Business Main P, 2005 Solid AN W. 173 TERRACE MAIN P, 2005 Solid AN P, 2005	ANN	PROFIT RPORATION UAL REPORT 1996	FLOR DIV	IDA DEPART Sandra B. Secretary ISION OF CO	of State ORPORATIONS		
85% NW. 173 TERRACE MAMI FL 33015 2. Principal Place of Business 2. Moving Address 2. Suite April # otc. 2. Principal Place of Business 2. Suite April # otc. 3. Defection Campaign Financing Suite April # otc. 3. Defection Campaign Financing Suite April # otc. 3.	1. Corporation	on Name I 300	0005744	1 (4)			
### Application Supplication Sup			Mailing Addre	ss			
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Application							3a. Date of Last Report
Solid Apt # etc 22	······································	Place of Business	<u> </u>	dress		4. FEI Number	Applied For
Cory & State 20	Suite, Apt	#, etc	Suite, Apt.	#, etc.			Not Applicable S8.75 Additional
### Sp. Country Zep Country Zep Country Zep Country Zep Sp. Country Zep Sp. Country Zep Sp. Sp	City & Stat	te		·			Fee Required
9. Name and Address of Current Registered Agent VALVERDE, EFRAIN 8336 N.W. 173 TERRACE MANI F1 33015 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Number is Not Acceptable. 84 City F1 Number is Not Acceptable. 85 Street Address (P.O. Box Number is Not Acceptable.) 86 City F1 Number is Not Acceptable. 87 Street Address (P.O. Box Number is Not Acceptable.) 88 City F1 Number is Not Acceptable. 89 Street Address (P.O. Box Number is Not Acceptable.) 80 Street Address (P.O. Box Number is Not Acceptable.) 80 Street Address (P.O. Box Number is Not Acceptable.) 81 Number is not accept the obligations of Sociation Statistics. The above-enable carporation submiss mis statement for the purpose of Company 1st registered along the purpose of Company 1st registered Agent 1st registered along the purpose of Company 1st registered Agent 1st		Country	28			Trust Fund Contribution	Added to Fees
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SIGNAL THE PRIVATE STATE AND TERRACE MAMIFES 3015 11. Present the processor of Sections 507 6020 and 607 1508 Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agone, or both, in the Section of Sections 507 6020 and 607 1508, florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agone, or both, in the Section of Section 607 5026, floridal Statutes. The above-named corporation submits this statement for the purpose of changing its registered agone, or both, in the Section of CVP 5026, floridal Statutes. The applications to board of directors. I hereby accept the application at registered and statutes are completed and accept the origination of CVP 5026, floridal Statutes. The applications of CVP 5027 floridal Sta			rent Registered Agent				
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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 agent, or both, in the State of Princial Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. If an idea with the above-named corporation is board of directors. I trends y accept the apparatment at size 3 seried agent. If an idea with the above-named corporation is board of directors. I trends y accept the apparatment at size 3 seried 3 statement and accept the other purpose and the						ress (P.O. Box Number is Not Acceptat	nle)
FL Pursuant to the provisions of Sections 607 0502 and 607 1508. Floridal Statutes. The above-named corporation submiss this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the coorporation's board of directors. Threely accept the expositional agent Tam familiar with and accept the obligations of Section 607 0505. Floridal Statutes. SIGNATURE SIGNATURE 12.							
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4. Ido 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 1 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 it made under oath, that I am an officer or the corrections or the corrections or the corrections.	SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature typed or protest name of registroid a OFFICERS A D VALVERDE, EFRAIN 6336 N.W. 173 TERRACE	agert and title it applicable AND DIRECTORS D D D D D D	ELETE ELETE	the above-named corporate a Statutes 13. 11 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 54 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE 52 NAME	red what revealing)	Unpose of changing its registered tithe appointment as registered CATE CHAIR CHANGE Addition Change Addition Change Addition Change Addition Change Addition
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