Form **8822**
(Rev. May 1992)
Department of the Treasury
Internal Revenue Service

Change of Address

▶ Please type or print.
▶ See instructions on back. ▶ Do not attach this form to your return.

OMB No. 1545-1163
Expires 5-31-95

Part I Complete This Part To Change Your Home Mailing Address

Check **ALL** boxes this change affects:

1 ☐ Individual income tax returns (Forms 1040, 1040A, 1040EZ, 1040NR, etc.)
▶ If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return, check here . . . . . ▶ ☐

2 ☐ Employment tax returns for household employers (Forms 942, 940, and 940-EZ)
▶ Enter your employer identification number here . . . . . ▶

3 ☐ Gift, estate, or generation-skipping transfer tax returns (Forms 706, 709, etc.)
▶ For Forms 706 and 706NA, enter the decedent's name and social security number below.

▶ Name ▶ Social security number

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5a Your name (first name, initial, and last name) — Your social security number

5b Spouse's social security number

5a Spouse's name (first name, initial, and last name)

6 Prior name(s). See instructions

7a Your old address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions — Apt. no.

7b Spouse's old address, if different from line 7a (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions — Apt. no.

8 New address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions — Apt. no.

Part II Complete This Part To Change Your Business Mailing Address or Business Location

Check **ALL** boxes this change affects:

9 ☐ Employment, excise, and other business returns (Forms 720, 941, 990, 1041, 1065, 1120, etc.)
10 ☐ Employee plan returns (Forms 5500, 5500 C/R, and 5500EZ)
11 ☐ Business location

12a Business name: NEVCO TRADING INC.

12b Employer identification number: 65 0602866

13 Old address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions: 1050 92ND ST. - BAY HARBOR ISLANDS, FL. 33154 — Room or suite no.: 4

14 New address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions: 2411 NE 32 CT. LIGHT HOUSE POINT, FL. 33064 — Room or suite no.

15 New business location (no., street, city or town, state, and ZIP code). If a foreign address, see instructions — Room or suite no.

Part III Signature

Daytime telephone no. of person to contact (optional) ▶ ( )

Please Sign Here

▶ Your signature — Date

▶ Spouse's signature. If joint return, both should sign — Date 6/27/97

▶ If Part II completed, signature of owner, officer, or representative — Date 6/27/97 ▶ Title: Secretary

For Privacy Act and Paperwork Reduction Act Notice, see back of form. Cat. No. 12081V Form **8822** (Rev. 5-92)

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