

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

APPROVED
AND
FILED

1997 AUG -5 PM 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 795000068766 (1)
1. Corporation Name

YOUTON ENTERPRISES CORP.

Principal Place of Business

Mailing Address

2000 NE 135 ST Ste # 403
NO. MIAMI FL 33181

3. Date Incorporated or Qualified

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 7740 ABBOTT AVE.

26 7740 ABBOTT AVE.

4. FEI Number

Applied For

Not Applicable

65-0610478

Suite, Apt #, etc.

22 2 A

Suite, Apt #, etc.

27 2 A

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

23 MIAMI BEACH

City & State

28 MIAMI BEACH

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

24 33141

Country

25 USA

Zip

29 33141

Country

30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YOUTON, IAN

2000 NE 135th St Ste # 403
NO. MIAMI FL 33181

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 type (for printed name of registered agent and the filer, if applicable)

(NOTE: Registered Agent signature required when installing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT
NAME YOUTON, IAN
STREET ADDRESS 2000 NE 135th St Ste 403
CITY-ST-ZIP NO MIAMI FL 33181

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

400002262824-06
-08/11/97-01056-008
****200.00 ****200.00

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 accounting officer 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:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-29-97

Date

Day and Month

CR2E034 (9-96)