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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000003862 (5)

E.V. INTERNATIONAL MARKETING AND CONSULTING, INC

**FILED** May 06 1998 8:00am Secretary of State



	_									
Principal Place	e <b>of B</b> usiness	Mailing Address						*****************	31118 1181 1881	
812 BRINY AVE. P.O. BOX 756										
12D POMPANO BEACH FL 33061			H FL 33061			DO NOT WRITE IN THIS SPACE				
POMPANO BEACH FL 33062 US US						3. Date Incorporated or Qualified				
••						01/09/1996				
2. Principal Pl	ace of Business	2a. Mailing Address	<u> </u>		· · · · · · · · · · · · · · · · · · ·	4. FEI Number		Ar	oplied For	
21		26				65-0641353		No	ot Applicable	
Suite, Apt.	#, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired	7 5	8.75	Additional	
22		27	,			b. Certificate of Status Desired		Fee Re	equired	
City & State	9	City & State	City & State			6. Election Campaign Financing				
23}		28				Trust Fund Contribution L		Added	~	
Zip Country		r- ¬	Zip Country			8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30.				
24)	25 29 30		[30]	Personal Property Tax due June 30. Yes LYN  10. Name and Address of New Registered Agent			₹NO			
9. Name and Address of Current Registered Agent						10. Haine and Address of New Hogis	olou Age			
	AUGHN, C. ELLIS									
812 BRINY AVE.				82 Street Address (P.O. Box Number is Not Acceptable						
12D				83						
P	OMPANO BEACH FL 33062									
				84	City		FL	35   Zip	Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida	Statutes, the at	LI	a-named cor	poration submits this statement for the purp	ose of ch	anging if	ls registered	
office or r	ealstered agent, or both, in the State.	of Horida. Such change	was authorized	d by	r the corpora	ation's board of directors. I hereby accept the	e appoin	ment as	registered	
agent. Lam temiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE	Signature, typod or proted name of registered upo-	ut and ten if applicable	(NO1E Registerer	ogA to	nt signature requ		DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICER				
TITLE	Р	∐ DELE	DELETE 1.1 T				⊢	Change	Addition :	
NAME	vaughn, C. Ellis		1.2 NAN						13	
STREET ADDRESS	812 BRINY AVE., 12-D		1.3 STF		ADDRESS				1	
CITY-ST-ZIP	POMPANO BEACH FL		1.4 0		T-ZIP			0	T Carrier	
TITLE		☐ DELE					<u> </u>	Change	L. Addition	
NAME			2.2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		DELE			ST-ZIP			Change	Addition	
TITLE		☐ DELE						Onettyc	AVAILION	
NAME			3.2 N/		ADDDECO				}	
STREET ADDRESS			i i		ADDRESS					
CITY-ST-ZIP		DELE			ST - ZIP			Change	Addition	
TITLE		_ 000	4.1 II				_	,		
NAME					ADDRESS					
STREET ADDRESS					ST-ZIP					
CITY-ST-ZIP TITLE		☐ DELE			91-ZIP			Change	Addition	
NAME			5.2 N					•		
STREET ADDRESS					ADDRESS					
					it-zip					
CITY-ST-ZIP TITLE		DELE						Change	Addition	
NAME			62 N				-	-		
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP					ST-ZIP					
ALLI ALLEN			510							

14. I 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 eath; that I am an officer or director of the corporation or the receiver on restricted 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 po an attachment with an address.