2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 AM
Secretary of State

DOCUMENT# P96000012384

Entity Name: SHEVAL INCORPORATED

Current Principal Place of Business:

17655 S.W. 6TH ST.
PEMBROKE PINES, FL

New Principal Place of Business:

Current Mailing Address:

17655 S.W. 6TH ST.
PEMBROKE PINES, FL

New Mailing Address:

FEI Number: 65-0651146 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, EVERAL
17655 S.W. 6TH ST.
PEMBROKE PINES, FL US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MILLER, EVERAL
Address: 17655 S.W. 6TH ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DTS ( ) Delete
Name: MILLER, SHERYLL
Address: 17655 S.W. 6TH ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: V ( ) Delete
Name: MILLER, ANTONIO
Address: 17655 S.W. 6TH ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D ( ) Delete
Name: MILLER, CHERISSE
Address: 17655 SW 6TH ST
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVERAL MILLER PD 04/29/2002

Electronic Signature of Signing Officer or Director Date