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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # **P96000044123 (3)** 

ANDEVEN, INC.

## **FILED** Apr 28 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 4222 RIVERHILLS DRIVE 4222 RIVERHILLS DRIVE TAMPA FL 33617 TAMPA FL 33617-7440								
			·		3. Date Incorporated or Qualified 05/23/1996	3a. Date	of Last R	leport
2. Principal Place of Business 2a. Mailing Addre			dress .		4. FEI Number 381035	Applied For Not Applicable		
Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired	;	\$8.75 Additional Fee Required		
City & State 23	е	City & State			Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zip 29	Cour 30	ntry	8. This corporation has liability for in Florida Statutes	intangible tax		. 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Age	ınt	
	RILAWYER CHARTERED			81 Name				
343 ALMERIA AVENUE CORAL GABLES FL 33134				82 Street Add	iress (P.O. Box Number is Not Acceptab	le)		
			ſ	83				
}			<b>,</b>	84 City		FL	35 Zip	Code
office or re agent. La SIGNATURE	egistered agent, or both, in the Stal m familiar with, and accept the oblig Signature typed or punited name of registered ag	e of Florida. Such change w gations of, Section 607.0505 pent and title if applicable	ras authorized b, Florida Statu (NOTE: Registered	by the corpora	poration submits this statement for the p tion's board of directors. I hereby accep ired when re-instating)	of the appoin	tment as	registered
12.	OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TITLE NAME	UZCATEGUI, MARCO A	DELETE	1.1 TITI 1.2 NAI			L.	Change	Addition
STREET ADDRESS	4222 RIVERHILLS DRIVE		1	REET ADDRESS				
CITY - ST - ZIP	TAMPA FL 33617			Y-\$1-ZiP				
TIBLE	VSTD	DELETE	2.1 101				Change	Addition
NAME	RUJANO, JOSE R		2.2 NAI	ME				
STREET ADDRESS	4222 RIVERHILLS DRIVE		2.3 STF	REET ADDRESS				
CITY ST-ZIF	TAMPA FL 33617	<b>—————————————————————————————————————</b>		Y-ST-ZIP				
TILE		DELÉTE		1		<b>L</b>	J Change	Addition
NAME			32 NA	1				
STREET ADDRESS CITY ST-ZIP				IEET ADDRESS Y-ST-ZIP				
Title		DELETE					Change	Addition
NAME			4. 2 NA	ME				
STREET ADDRESS	15		4.3 STF	REET ADDRESS				
CiTY+ST-7IP				Y-ST-ZIP		<u></u>		
TILLE		DELETE		į į			Change	MoilibbA
NAME			5.2 NA					
STREET ADDRESS				REET ADORESS				
CITY-SI-Zi-		T DELETE		Y-ST-ZIP			Chesse	A alaba
THU		☐ DELETE		į.		Ļ	Change	Addition
NAME			62 NA					
STREET ADDRESS				HEET ADDRESS				
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP	11-0-11-140 05/0V/N Et 14-0	<del></del>		

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 receiver or trustee 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: