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 #1. Corporation Name P96000062222 (0)

OVAS CORPORATION

9. Name E.H.G. RESID **5100 TOWN BOCA RATO**

2. Principal Place of Busi Suite, Apt. #, etc.

City & State

22

23 Zip 24

Principal Place of Busines 8801 S.W. 132ND STREET MIAMI FL 33176

FILED Mar 23 1998 8:00am Secretary of State

SS	Mailing Address		t tablises, tie thise firit thist hour dott and but all a sible sible tiefs is a			
Т	8801 S.W. 132ND MIAMI FL 33176	STREET	DO NOT WRITE IN THIS COACE			
U\$			DO NOT WRITE IN THIS SPACE			
			3. Date Incorporated or Qualified 07/25/1996			
ness	2a. Mailing Addres	\$\$	4. FEI Number 65-07-35 00 Applied For			
	26		APPLIED FOR Not Applicable			
Suite, Apt. #, etc.		tc.	Certificate of Status Desired Sa.75 Additional Fee Required			
	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
ENT AGENTS, IN		81 Name				
Center Circle, N FL 33486	SUITE 330	82 Street A	Street Address (P.O. Box Number is Not Acceptable)			
		83				

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.

84 City

SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
TITLE	PD	DELETE	1.1 TITLE	☐ Change	Addition		
NAME	estrella, evelio		1.2 NAME				
STREET ADDRESS	8801 S.W. 132ND STREET		1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33176		1.4 CITY - ST - ZIP				
TITLE	SD	☐ DELETE	2.1 TITLE	Change	Addition		
NAMÉ	CAMERA, CARMINE		2.2 NAME				
STREET ADDRESS	8801 S.W. 132ND STREET		2.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33176		2. 4 CITY-ST-ZIP				
TITLE		DELETE	3.1 TITLE	☐ Change	Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY - ST - ZIP				
TITLE		DELETE	4.1 TITLE	Change	Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE	☐ Change	Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE	·	☐ DELETE	6.1 TITLE	Change	Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
A.T. A. 3			■				

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 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 changed and the statutes in 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 changed in the same legal effect as if made under oath; that I am an officer or director of the corporation of 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 chapter 607 is a supplemental annual report in the same legal effect as if made under oath; that I am an officer or director of the corporation of 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 chapter 607 is a supplemental annual report in the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the

SIGNATURE:

Zip Code