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ANEDVI CORP.					FILED			
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Principal Place of Business Mailing Address					SECRETARY OF STATE			
<i>\</i>	0820 SW 188 Jiani, FL 3	31. 3157			TAL	LAHASSEE,	FLORI	DA .
2. Principal	Place of Business	3. Mailing Address			,			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number Applied For Not Applied For Not Applied For			<del> </del>	
Zip Country		Zip	Country		5. Certificate of Status Des	ired 🗆 \$	8.75 Ad	ditional
	6. Name and Address of Current	Registered Agent			7. Name and Address of N			<del></del>
	Ivelle Gonzale	ez.		Name				
	3847 Turtle Ru	11	Street Address	(P.O. Box Number is Not Accep	otable)			
	Coral Springs,	FL 33067						
	J .		L	City .		FL	Zip Coc	le
	e named entity submits this statement fo		L	-			<u> </u>	
Tax filing (See crite	Esquature, typed or printerginame of registered afters to contact in its eligible to satisfy its Intangible requirement and elects to do so, pria on back)	FILE NOWII After MAY 1, 200 Make Check Payabi	I FEE IS 1 Fee w e to Dep	ill be \$550,00	10. Election Campaid Trust Fund Contr	bution.	Adde	May Be to Fees
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ITY-ST-ZIP	3847 Turtle Run Blvd. # 2411 Coral Springs, FL 33067			I-21P				
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TY-ST-ZIP  TLE  AME  REET ADDRESS  TY-ST-ZIP  3. 1 hereby of indicated	certify that the information supplied with I on this report or supplemental report is	this filing does not qualify for the true and accurate and that m	NAME STREET CITY-SI the exemp y signatur	zip otion stated in Se e shall have the	same legal effect as it made ur	7-6 C	an officer	nformation or director
TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-SI-ZIP 3. I hereby of indicated of the core		this filing does not qualify for a true and accurate and that my wered to execute this report a	NAME STREET CITY-SI the exemp y signatur	zip otion stated in Se e shall have the	same legal effect as it made ur	7-6 C	an officer	nformation or director
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## ANEDVI CORP. DOC.#P97000021532

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION. DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS. THANK IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

SINCERELY,

IVETTE GONZALEZ

**PRESIDENT**