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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000058350 (4)

BEVINO ENTERPRISES, INC.

FILED Feb 06 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 16 BIRCH AVE 16 BIRCH AVE SHALIMAR FL 32579 SHALIMAR FL 32579 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/02/1997 2. Principal Place of Business 4. FEI Number 59-345596 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NamaCEXANDILA BENIVO, JERRY HAUGHT 5 CLIFFORD DR 82 Street Address (P.O. Box Number is Not Acceptable) SHALIMAR FL 32579 84 Zio Code \$2-5-79 SHALIMAR Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered change was authorized by the corporation's baard of directors. I hereby accept the appointment as registered 11. Pursuant to the provisions of office or registered agent, agent. I am familiar with, a ida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change 1.1 TITLE Addition BEVINO, JERRY NAME 1.2 NAME 16 BIRCH AVE STREET ADDRESS 1.3 STREET ADDRESS SHALIMAR FL 32579 CITY-ST-ZIF 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition BEVINO, FRANK NAME 2.2 NAME 6909 CAT CREEK RUN STREET ADDRESS 2.3 STREET ADDRESS AUSTIN TX 78731 CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDFESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change 5.1 TITLE 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** 6.4 CITY-ST-ZIP

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 on an attachment with an address.

SIGNATURE: JULY JOUND RE PLERRY TREVIN

Feb > 1998

850/651-4116