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 # P97000067909 (6)

EV GLOBAL, INC.

Principal Place of Business

....

Mailing Address

FILED
May 07 1998 8:00am
Secretary of State



11339 SOUTHWEST 132ND PLACE 11339 SOUTHWEST 132ND PLACE LINIT 2 UNIT 2 DO NOT WRITE IN THIS SPACE MIAMI FL 33186 MIAMI FL 33186 3. Date Incorporated or Qualified 08/06/1997 2a. Mailing Address 2. Principal Place of Business Applied For 39 SW 132101 Place 65-0781932 Same Not Applicable Suito, Apt. #, etc **\$8.75** Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \square No Da 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name AMERILAWYER CHARTERED 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 83 84 City 85 Zip Code 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. SIGNATURE Signature typed or printed name of registeriid agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE ☐ Change ☐ Addition VENTURA, EMMANUEL NAME 1.2 NAME 11339 SW 132ND PLACE, UNIT 2 STREET ADDRESS 1.3 STREET ADORESS **MIAMI FL 33186** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE ___ Addition NAME 3.2 NAME STREET ADDRESS 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 44 CITY-ST-ZIP DELETE TITLE Change 5.1 TITLE Addition NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change Addition 61 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 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 suppliemental 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 13 if changed, or on an attachment with an address.

SIGNATURE: Emmanue / Ventore of Communications

CR2E034 (10/97)