

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000074988****1. Entity Name**
EVANS/7TH AVENUE CORP.**FILED**
Jan 31, 2002 8:00 am
Secretary of State

01-31-2002 90075 014 ***158.75

Principal Place of Business
612 SOUTHEAST 5TH AVENUE
SUITE #1
FORT LAUDERDALE FL 33301**Mailing Address**
612 SOUTHEAST 5TH AVENUE
SUITE #1
FORT LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0862394**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****EVANS, JAMES D**
612 SOUTHEAST 5TH AVENUE
SUITE #1
FORT LAUDERDALE FL 33301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.**SIGNATURE** _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.**
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing**
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11****TITLE** **DP** ☐ Delete
NAME **EVANS, JAMES D**
STREET ADDRESS **6520 SW 134TH DR., DEVONWOOD**
CITY-ST-ZIP **MIAMI FL 33156****TITLE** ☒ Change ☐ Addition
NAME **EVANS, JAMES D**
STREET ADDRESS **612 SE 5th Ave Suite #1**
CITY-ST-ZIP **FT LAUD, FL 33301****TITLE** **VST** ☐ Delete
NAME **AMARO, NICHOLAS**
STREET ADDRESS **612 SOUTHEAST 5TH AVENUE, SUITE #1**
CITY-ST-ZIP **FORT LAUDERDALE FL 33330****TITLE** ☐ Change ☐ Addition
NAME **AMARO, NICHOLAS**
STREET ADDRESS **612 SOUTHEAST 5TH AVENUE, SUITE #1**
CITY-ST-ZIP **FORT LAUDERDALE FL 33330****TITLE** **DV** ☐ Delete
NAME **EVANS, MARILYN A**
STREET ADDRESS **6520 SOUTHWEST 134TH DRIVE**
CITY-ST-ZIP **MIAMI FL 33156****TITLE** ☒ Change ☐ Addition
NAME **EVANS, MARILYN A**
STREET ADDRESS **612 SE 5th Ave Suite #1**
CITY-ST-ZIP **FT LAUD, FL 33301****TITLE** **VD** ☐ Delete
NAME **EVANS, JAMES D JR**
STREET ADDRESS **612 SOUTHEAST 5TH AVENUE, SUITE #1**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301****TITLE** ☐ Change ☐ Addition
NAME **EVANS, JAMES D JR**
STREET ADDRESS **612 SOUTHEAST 5TH AVENUE, SUITE #1**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301****TITLE** ☐ Delete
NAME **EVANS, JAMES D JR**
STREET ADDRESS **612 SOUTHEAST 5TH AVENUE, SUITE #1**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301****TITLE** ☐ Change ☐ Addition
NAME **EVANS, JAMES D JR**
STREET ADDRESS **612 SOUTHEAST 5TH AVENUE, SUITE #1**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301****TITLE** ☐ Delete
NAME **EVANS, JAMES D JR**
STREET ADDRESS **612 SOUTHEAST 5TH AVENUE, SUITE #1**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301****TITLE** ☐ Change ☐ Addition
NAME **EVANS, JAMES D JR**
STREET ADDRESS **612 SOUTHEAST 5TH AVENUE, SUITE #1**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301****13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.****SIGNATURE:****SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/02

Date

954 522-7770

Daytime Phone #

CR2E034 (9/01)