FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1996		Secretary of State DIVISION OF CORPORA		IONS			
	MENT #	S22508	(3)					
1. Corporation		EVETEME INC						
20/20 II		SYSTEMS INC.				1 JUBAH BIR HAD HADA 1880 I BINI BIN	<u> </u>	(0 111 2) (11 1)
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Principal Place			ailing Address					
4618 ALTON I MIAMI BEACH			4618 ALTON ROAD Miami Beach Fl 33:	ł1 4()				
				. 10		3. Date Incorporated or Qualified	3a. Date of Last Repo	ort
						01/04/1991	04/17/1995	
	ace of Business		Mailing Address			4, FE! Number 50-2047202	├	plied For
21 Suite, Apt. #	 #. etc.	26	Suite, Apt. #, etc.			59-3047393	Not Not	t Applicable
22		27				5. Certificate of Status Desired	Fee Rec	
Orty & State			City & State			6. Election Campaign Financing	\$5.00	
23 Zip		untry 28		Countr		Trust Fund Contribution	Added to	
24	25	29	ZID	30	У	8. This corporation has liability for Florida Statutes 🙀 Ye	rintangible tax under si 19 si ∐No	9.032,
	9. Name and Ad	ddress of Current Regist	ered Agent			10. Name and Address of New		
210057				81	1 Name			
BARBEITE, PLACIDO A. 4618 ALTON ROAD					ress (P.O. Box Number is Not Accepta	ble)		
	EACH FL 33140			83	3			
**** ****	brion i E conta			[8/	4 Gity		Tagl 700	- 1
					1 '		FL 85 Zp C	
 Pursuant to or registere 	o the provisions of S ad agent, or both, in	Sections 607,0502 and 607 the State of Florida, Such	1.1508, Florida Statu change was author	utes, the above rized by the con	named corpor poration's boa	ration submits this statement for the pu and of directors. Thereby accept the app	rpose of changing its regis	stered office lent. Lam
	h, and accept the ob	bigations of, Section 607.0	0505, Florida Statute	es				01.11.
SIGNATURE S	Signatine typed or printed r	name of registeric agent and tilk it ap	pyloafie 0	NOSE Bayede ed Age	ബിടുവിയ് പുംഘ	ed when recistering in	DATE	
12.		OFFICERS AND DIREC	TORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS	
THEF	D BADDEITE DI	40IDO A	☐ DELETE	1 1 THTLE			Change [Addition
NAME STREET ADDRESS	BARBEITE, PL 4618 ALTON F			1.2 NAME				
CITY-SI-ZIF	MIAMI BEACH			1.3 STREE 1.4 City -	ELADORESS ST. ZiP			
TIBLE			☐ DELETE	2 1 7051.6			Change [Addition
NAME				2.2 NAME			_	_
STREET ADDRESS				2 3 STRF1	ET ADDRESS			
CITY - S1 - ZIF			FT DELETE	24014				- 1343
NAME			☐ DELETE	3 1 1 TLE			Change	Addition
STREET ADDRESS				3.2 NAME 3.3 SUBSE	ET ADORESS			
CITY-ST-ZIP				3 4 CHY-				
TITLE	, <u> </u>		DELETE	4 1 TITLE			☐ Change ☐	Addition
NAME				4.2 NAME				
STREET ADDRESS					PRESIDENT I			
CITY - ST - 710	ļ		DELETE	4 4 City - 5 1 Till E		*	Change	1 Addition
NAME			[] better	5 7 MILE 5 2 NAME			Ш Опапус — <u>Г</u>	Addition
STREET ADDRESS				4	LADDRESS			
1								
City-St-zip	· · · · · · · · · · · · · · · · · · ·			5.4 CHY-	51 - ZIP			
C(1Y - ST - Z(P T!TLF			DELETE	6 1 TIT_F			Change [Addition
TITLE NAME	· · · · · · · · · · · · · · · · · · ·		☐ DETEIE	6 1 TITLE 62 NAME			Change [Addition
THILE			DELETE	6 1 TITLE 62 NAME	1 ADDRESS		☐ Change [Addition

Control of your way the control incompanion in supplied with this litting is voluntarily turn issued and does not quarry for the exemption stated in Section 119.07(3)(k). 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:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING EFFICER OR DIRECTOR