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

FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name EVELYN ENTERPRISES, INC. Principal Place of Business Mailing Address 5102 EVELYN DRIVE TAMPA, FL 2. Principal Place of Business 3. Date Incorporated or Qualified 33609 3a. Date of Last Report May 5, 1992 May, 1995 2a. Mailing Address 59-3134092 Applied For 21 26 Suite, Apt. #, etc. Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional 22 Fee Required City & State City & State 6. Election Campaign Financing 23 \$5.00 May Be 28 Trust Fund Contribution Added to Fees Ζıρ Country Country 8. This corporation has liability for intangible tax under s 199.032 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Margaret Bowles 5102 Evelyn Drive Name Street Address (P.O. Box Number is Not Acceptable) 82 83 Tampa, FL 33609 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title 1 applicable (NOTE: Registered Agent signature required when rehistating) 12. OFFICERS AND DIRECTORS CR2E034 (12/95) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE Margaret Bowles DELETE 1. 1 Tille Change Addition NAME President 1.2 NAME 5102 Evelyn Drive Tumpa, FL 33609 STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE TITLE 2. 1 TITLE Change ☐ Addition NAME 22 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 24 C(1Y-ST-Z(P TITLE DELETE 3 1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4 CITY-ST-ZIF TITLE DELETE 4 1 TITLE Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP 00001849163 -06/04/96--01017--024hange TITLE DELETE 5 1 THILE ☐ Addition NAME 5.2 NAME ***225.00 STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6 : TITLE Change ■ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7P 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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 appears in Block 12 or Block 13 if changed or of an attachment with an address 64 CITY - ST - ZIP SIGNATURE:

813 229-1483 Dayting Phone #