

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUN 30 AM 9:32

DOCUMENT # V46552

(E)

1. Corporation Name

BEVIS ENTERPRISE INC.

Principal Place of Business

Mailing Address

**4210 SW 103RD CT
MIAMI FL 33165**

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MIAMI FL 33165**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/29/1992	3a. Date of Last Report 06/21/1994
4. FID Number 65-0344715	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. ☐	\$5.00 May Be Added to Fees
7. The corporation has liability for incorporation tax under s. 190.002 Florida Statutes ☐ no ☐ yes	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	25. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
30. Country	

9. Name and Address of Current Registered Agent

**BEVIS, THOMAS LESTER
4210 SW 103RD CT
MIAMI FL 33165**

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. State

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 _____

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS	
TITLE	NAME	TITLE	NAME
D	BEVIS, THOMAS LESTER		
4210 SW 103RD CT			
MIAMI FL			
D	BEVIS, LINDA L		
4210 SW 103RD CT			
MIAMI FL			

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 130.07(1)(b), 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 make 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: *Thomas Lester Bevis* **6/24/95 (305) 553 6729**

CR2E034 (3/95)