

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000051987

**Entity Name:** EVAKRIS INC

**Current Principal Place of Business:**

5424 HAMMOCKVIEW LANE  
APOLLO BEACH, FL 33572

**Current Mailing Address:**

5424 HAMMOCKVIEW LANE  
APOLLO BEACH, FL 33572

**FEI Number:** 47-1113890

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TOUSSAINT, ANNATHALIA  
5424 HAMMOCKVIEW LANE  
APOLLO BEACH, FL 33572 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            P  
Name            TOUSSAINT, ANNATHALIA  
Address        5424 HAMMOCKVIEW LANE  
City-State-Zip: APOLLO BEACH FL 33572

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANNATHALIA TOUSSAINT

**PRESIDENT/OWNER**

**04/28/2016**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date