## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 24 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # 624147

(5)

ELITE INTERNATIONAL CORP.

				81811 <b>3</b> 7811 <b>3</b> 1341 313.					
Principal Place of Business Mailing Address					1 100110 01110	itass mikan start miatt snat.	ישנט וזקוט ווקוט זיקוט	1 MINII MINIE	1004
3711 NW 71 S MIAMI FL 3314		3711 NW 71 ST Miami FL 33147-6521							
					3. Date Incorp 06/08/197	prated or Qualified	3a. Date of Last Report 01/26/1996		
	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number App			d For
21		26			59-1912	923		<del> </del>	oplicable
Suite, Apt	#, etc.	Suite, Apt #, etc.			5. Certificate o	f Status Desired		.75 Addi	
City & Stat	te	City & State			6 F(+-4) - 0-			ee Requir	
23		28			Trust Fund (	npaign Financing		.00 May	
Ζιρ	Country	Zφ	Count	ry		ition has liability for i			
24	25	29	30		Florida Statu		Yes □ No		01002.
	9, Name and Address of Curre	ent Registered Agent				Address of New Re	gistered Agent		
	PPERT, JOSEPH H.		8	1 Nan	ne				
	40 N. KENDALL DRIVE, SUITE :	201	8	2 Stre	et Address (P.O. Box Num	ber is Not Acceptab	le)		
MIA	MI FL 33176		<u> </u>				·		
			8	3					
			8	4 City			85	Zip Code	e
44 Durement	to the provisions of Sections 607.05	00 and 607 1509 Florida Stat	stee the she				FL  °°		·
office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Stat m familiar with, and accept the obli-	te of Florida. Such change was gations of, Section 607.0505, F	authorized lorida Statut	by the c	orporation's board of direc	tors. I hereby accep	t the appointme	nt as regi	istered
SIGNATURE	Signature, typed or printed harne of regulered a					······································			
12.		VD DIRECTORS	13.	gent signa	ture required when reinstating)	HANGES TO OFFIC	DATE PEDG AND DIDE	CTOBE IN	1 12
TOTALE	PT	DELETE	1.1 T(TLE	<del></del>	ADDITIONAL	HANGES TO OFFIC	Ch Ch		Addition
NAME	BAIKOVITZ, ABRAHAM		1.2 NAM	E					
STREET ADDRESS	1516 CLEVELAND RD		1.3 STRE	et addres	s				
C(TY-ST-7)P	MIAMI BEACH FL		1.4 CHTY	-ST-2IP					
TITLE	S	☐ DELETE	2.1 TITLE				☐ Ch	ange _	Addition
NAME	BAIKOVITZ, SIMA		2.2 NAM	E					
STREET ADDRESS	1516 CLEVELAND RD		2.3 STRE	ET ADDRES	s				
CITY - ST - ZIP	MIAMI BCH FL		2 4 CITY	-ST-ZIP		4		<u>.</u>	
THILE	CONDE CADIDO I	DELETE	3.1 TITLE			·	☐ Ch	inge	Addition
NAME	CONDE, CARLOS L. 5537 NW 194 CRCLE TERR	/	3.2 NAM						
STREET ADDRESS	MIAMI FL			ET ADDRES	\$				
CITY+ST-ZIP TITLE	MANN I C	DELETE	3.4 CITY				Пас		Tages.
NAME			4.1 TITLE 4. 2 NAM				[_] Ch	mge L	J Addition
STREET ADDRESS					e				
CITY-ST-ZIP			ľ	ET ADDRES	9				
TITLE		DELETE	4.4 CITY 5.1 TITLE				☐ Cha	inge I	Addition
NAME		house to	5.2 NAM					yv	# CANTIGOT
STREET ADDRESS .				- et addres	s				
CITY-SE-ZIP			54 CITY		<b>~</b>				
TITLE		DELETE	61 TITLE	_			Cha	ange	Addition
NAME			62 NAMI				V.,	a · • • • • • • • • • • • • • • • • • •	
STREET ADDRESS			4	- Et addres	s				
DITH OT 7:0			3301112		~	•			

14. I do 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 armual 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

ABRAHAM BAIKOVITZ-RES.