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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K42994

(9)

Mailing Address

ELORAC, INC.

Principal Place of Business

FILED Apr 24 1997 8:00am Secretary of State



| 3. Date Incorporated or Qualified 11/03/1988 04/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applied For Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State City & State City & State 2a Country 2. Country 3. Date Incorporated or Qualified 11/03/1988 4. FEI Number Applied For Not Applied For N | C/O CAROLE M. 17174 NW 87 AV REDDICK FL 326 | E RD | 17174 NW 87 A REDDICK FL 33 US | | | | | | | |
|--|---|------------------------------------|---------------------------------------|------------|--------------|-------------------|--|---------------------------------------|----------------------|----------------------------|
| 2. Principal Princip Cor Lances 2. Mailing Address 4. Et Number 5. Control 5. Contro | | ~~ | •• | | | | 1 | į. | | eport |
| Section Sect | 2. Principal Plac | ce of Business | 28. Mailing Add | dress | | ****** | | ··· | | plied For |
| Section Sect | 21 | | 26 | | | | 65-0080408 | | No | t Applicable |
| Country 28 Country 28 Country 28 Country 28 Country 29 Coun | Suite, Apt. #, | elc | ├ı | #, etc. | | | | □ \$ ¹ | | |
| Part Country Zip Country Zip Country St. This corporation has liability for inlangible gaunder s. 1990.032 | City & State | | | ? | | | | | | |
| 25 29 30 Florida Statutos Ces None and Address of Current Registered Agent 10, Name and Address of New Registered 10, Name and Address 10, Name and Addres | | Country | | | Country | | | | | |
| Name and Address of Current Registered Agent | 24 | 25 | 29 | ſ | 30 | | · · · · · · · · · · · · · · · · · · · | | | 100.000 |
| NASSI, CAPOLE M. 11. Pursuant to the provisions of Sections 697 0592 and 697 1508. Florida Statutes, the above-names corporation submits this statement for the purpose of changing its registered agent or hoth in the State of Florida Statutes, the above-names corporation submits this statement for the purpose of changing its registered agent and revealur with and accept the obligations of, Section 697 0505. Florida Statutes. SIGNATURE 12. OF FICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NASSI, CAROLE M. 13. STREET ADDRESS NASSI, CAROLE M. 17174 NW 87 AVE RD 1.3 STREET ADDRESS NASSI, ROBERT E 17114 NW 87 AVE RD 1.3 STREET ADDRESS NASSI, ROBERT E 1.3 STREET ADDRESS NASSI, ROBERT E 1. | | 9. Name and Address of Curi | ent Registered Agent | | | | 10. Name and Address of New Re | distered Ager | ıt | |
| 17.174 W 87 AVE RD REDDICK FL 32888 | KASS | I. CAROLE M. | | | 81 | Name | | | | |
| Record Part Record R | 17174 | NW 87 AVE RD | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptab | le) | | |
| The provisions of Socions 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its 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 and remain with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE | REDD | ICK FL 32686 | | | 83 | | | | | |
| 1. Province of to the processors of Sections 607.0502 and 607.1508. Ploride Statutes, the above named corporation automits this statement for the purpose of changing its registered oldicor or post offer agent 1 am farminar with, and accept the obligations of, Section 607.0508, Floride Statutes. Signature Section 607.0508, Floride Statutes Province of Section 607.0508, Floride Statutes | | | | | 84 | City | | FI 85 | Zip (| Code |
| SIGNATURE | office or rec | astered agent, or both, in the Sta | ate of Florida. Such cha | ande was a | uthorized by | the corpora | poration submits this statement for the pation's board of directors. I hereby accept | urpose of cha | nging its nent as | s registered registered |
| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 In | SIGNATURE | · | | | | | | | | |
| DP | | | | (NOTE | | ni signature requ | | - | ECTOB | C IN 12 |
| NAME STREET ADDRESS THE | | | | DELETE | | ····· | ADDITIONS/OTTATOLS TO OTTIC | | | |
| 17174 NW 87 AVE RD 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY - \$1 - 20P | J | • | ·! | OLLC'IL | | 1 | | h | onungo | L_ noution |
| The color of the | | | | | • | | | | | • |
| THE VP | - 1 | | | | | 1 | | | | |
| NAME | *************************************** | | | DELETE | | 7 - ZIP | | · · · · · · · · · · · · · · · · · · · | Change | Addition |
| 17174 NW 87 AVE RD 23 STREET ADDRESS | 1 | •• | السا | DELETE | | | | L) | rusuūs | |
| City Street Address | | | | | | | | | | |
| DELETE DELETE STITILE Change Addition | 1 | | | | | | | | | |
| NAME STREET ADDRESS | | HEDUICK FL | | חרו לזר | | S1 - ZIP | <u> </u> | | Channa | 1 Addition |
| 33 STREET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP | ſ | | Ш | DELETE. | • | 1 | | السا | Unange | LJ Addition |
| | | | | | |] | | | | |
| DELETE | j | | | | | | | | | |
| NAME | | | | DELETE | | ST-ZIP | | | Chann | Lane. |
| | | | LJ | UELEIE | | | | L | unange | T Addition |
| Addition | 1 | | | | | 1 | | | | |
| DELETE | | | | | | | | | | |
| NAME | | | | DELETE | | T-ZIP | | | | F-17.7 |
| STREET ADDRESS | ſ | | LJ | VELETE | | 1 | | . | unange | ☐ Addition |
| CHY-SI-7E 54 CHY-ST-ZIP TOLE DELETE 61 TITLE Change Addition NAMI 62 NAME STREET ADDRESS 6.3 STREET ADDRESS | | | | | | | | | | |
| TIBLE DELETE 61 TITLE Change Addition NAMI 62 NAME STREET ADDRESS 6.3 STREET ADDRESS | STREET ADDRESS | | | | 5.3 STREET | ADDRESS | | | | |
| NAME STREET ADDRESS 6.3 STREET ADDRESS | | | · · · · · · · · · · · · · · · · · · · | | | Y-ZIP | | | | |
| STREET ADDRESS 6.3 STREET ADDRESS | THE | | | DELETE | 61 TITLE | | | | Change | Addition |
| | NAME | | | | 6.2 NAME | | | | | |
| CTY+ST-ZIP 6.4 CITY-ST-ZIP | STREET ADDRESS | | | | 6.3 STREET | ADDRESS | | | | |
| | CHY-S1-ZIP | | | | 6.4 CITY-5 | 7-ZIP | | | | |

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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

GNATURE AND TYPED UP PRINTED NAME OF FIGURING OFFICER OR DIRECTOR

4-17-97

(352)591-1668