

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000064049

Entity Name: ELITE ASSISTANCE, INC.

FILED
Jan 12, 2007
Secretary of State

Current Principal Place of Business:

99 SE MIZNER BLVD 411
BOCA RATON, FL 33432 US

New Principal Place of Business:

99 SE MIZNER BLVD
613
BOCA RATON, FL 33432 US

Current Mailing Address:

99 SE MIZNER BLVD 411
BOCA RATON, FL 33432 US

New Mailing Address:

99 SE MIZNER BLVD
613
BOCA RATON, FL 33432 US

FEI Number: 20-4830607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRISCOE, ERICKA
99 SE MIZNER BLVD 411
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

BRISCOE, ERICKA
99 SE MIZNER BLVD
613
BOCA RATON, FL 33432 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: ERICKA BRISCOE

01/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BRISCOE, ERICKA
Address: 99 SE MIZNER BLVD 411
City-St-Zip: BOCA RATON, FL 33432 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BRISCOE, ERICKA
Address: 99 SE MIZNER BLVD 613
City-St-Zip: BOCA RATON, FL 33432 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ERICKA BRISCOE

PD

01/12/2007

Electronic Signature of Signing Officer or Director

Date