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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P940 1. Corporation Name EL BLAU, INC.	000083811							
Principal Place of Business Mailing Address				T (MANIFER COM INDICENTAL DESIGN BERGE) BEGGET DE COME (1184 INCIDENTIFICAL FIRM)				
2548 MERCEDES DRIVE FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316				DO NOT WRITE IN THIS SPACE				
				3.	Date Incorporated or Qualifed 11/16/1994			
2. Principal Place of Business	2a. Mailing Address			4.	FEI Number	Applied For		
21	26			<u> </u>	<u>65-0537801</u>	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5.	Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State			6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 24 25	29 30	untry			This corporation owes the current year I Personal Property Tax.	☐Yes ☐No		
Name and Address of Current Registered Agent				10.	Name and Address of New Registere	d Agent		
MURRAY, DAVID G 321 SE 15 AVENUE FT LAUDERDALE FL 33301			81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83					
		84	City			85 Zip Code		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO O	FFICERS AND DIRECTO	CERS AND DIRECTORS IN 12					
TITLE	P DELETE	1.1 TITLE		☐ Change	Addition					
NAME	MALDONADO, ELSA	1.2 NAME								
STREET ADDRESS	2548 MERCEDES DR.	1.3 STREET ADDRESS			Ì					
CITY-ST-ZIP	FT LAUDERDALE FL 33316	1.4 CITY-ST-ZIP								
TITLE	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition					
NAME		2.2 NAME								
STREET ADDRESS		2.3 STREET ADDRESS								
CITY-ST-ZIP		2.4 CITY-ST-ZIP								
TITLE	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition					
NAME		3.2 NAME								
STREET ADDRESS		3.3 STREET ADDRESS								
CITY-ST-ZIP		3.4. CITY-ST-ZIP								
TITLE	DELETE	4.1 TITLE		☐ Change	☐ Addition					
NAME		4. 2 NAME								
STREET ADDRESS		4.3 STREET ADDRESS)					
CITY-ST-ZIP		4.4 CITY-ST-ZIP								
TITLE	[] OELETE	5.1 TITLE		☐ Change	Addition					
NAME		5.2 NAME								
STREET ADDRESS		5.3 STREET ADDRESS			}					
CITY-ST-ZIP		5.4 CITY-ST-ZIP		-						
TITLE	☐ DELETE	6.1 TITLE		☐ Change	☐ Addition					
NAME		6.2 NAME								
STREET ADDRESS		6.3 STREET ADDRESS								
CITY-ST-ZiP		6.4 CITY-ST-ZIP								

14. I 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 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, with all other like empowered.