

DOCUMENT # 333091			
1. Entity Name ELVIRA INCORPORATED			
Principal Place of Business 6325 MAYNADA CORAL GABLES FL 33146		Mailing Address 6325 MAYNADA CORAL GABLES FL 33146-3315	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address PO Box 5305 Suite, Apt. #, etc. City & State BREECKENRIDGE, CO Zip 80424 - Country USA	
6. Name and Address of Current Registered Agent			
COHEN, JAY M 6325 MAYNADA CORAL GABLES FL 33146		Name Street Address (F) City	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	
11. OFFICERS AND DIRECTORS		12.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COHEN, JAY M. 6325 MAYNADA CORAL GABLES FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COHEN, DIANE 6325 MAYNADA CORAL GABLES FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607 of the Internal Revenue Code, and that the information is true and accurate and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 of the Internal Revenue Code, changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Jay M Cohen</u> JAY M COHEN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

Daytime Phone #