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

Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jan 20 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 623701 (0)**ELM HOLDING CORPORATION** Principal Place of Business Mailing Address % MARJORIE WEBER 6644 WINDSOR LANE 5237 LA GORCE DRIVE 6644 Windsor Landliami BEACH FL 33141 MIAMI BEACH FL 83140 - Miami Beach (1, 8314) DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/01/1979 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 4644 Winds say 04-2022003 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 Miami Bea Added to Fees Trust Fund Contribution 28 Country 8. This corporation owes or has paid the current year Intangible 25 Miami Dac (29) Name and Address of Current Registered Agent <u>33</u> 30 Personal Property Tax due June 30. Yes ☐ No 10. Name and Address of New Registered Agent 81 WEBER, MARJORIE J. 6644 WINDSOR LANE 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33141 R3 City 84 Zip Code 11. Pursuant to the previsions of Sections 607.05.02 and 607.15.08, 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 (NOTE: Registered Agent's gnature required when reinstating) Signature typed or printed name of rupic timed agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE PD ___ Addition 1.1 THUE NAME ROSEN, RUTH 1.2 NAME CR2E034 20355 NE 34TH CT. STREET ADDRESS 1.3 STREET ADURESS N MIAMI BCH., FL 1.4 C(TY - ST - Z(P CITY-ST-ZIP DELETE Change Addition TITLE 21 THLE WEBER, MARJORIE NAME 2.2 NAME 6644 WINDSOR LN STREET ADDRESS 2 3 STREET ADDRESS MIAMI BCH. FL CITY-ST-ZIP 2 4 CITY-ST-Z(P DELFTE Change Addition TITLE 3.1 TITLE BADGER, ELLEN NAME 3.2 NAME 210 NAHANTON ST. 3 STREET ADDRESS 3.3 STREET ADDRESS NEWTON MA CITY-ST-ZIP 3.4. CITY - ST-ZIP Change Addition TITLE 4.1 TITLE EGBERT, LINDA 4. 2 NAME NAME 433 GUARD HILL RD STREET ADDRESS 4.3 STREET ADDRESS BEDFORD NY CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-S1-7IP 5.4 CITY - \$1 - ZIP TITLE DELETE 61 TITLE Change 600002405816 -01/21/98--01008--035 NAME 62 NAME 63 STREET ADDRESS STREET ADDRESS ***150.00 CITY-S1-20 14. Thereby 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

FILED

1.6 , 97 305-448,1220