

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 683317

Entity Name: ELASON, INC.

FILED
Aug 17, 2006
Secretary of State

Current Principal Place of Business:

1555 NORTH PARK DR STE 100
WESTON, FL 33326

New Principal Place of Business:

11098 BISCAYNE BOULEVARD
304
MIAMI, FL 33161

Current Mailing Address:

1555 NORTH PARK DR STE 100
WESTON, FL 33326

New Mailing Address:

11098 BISCAYNE BOULEVARD
304
MIAMI, FL 33161

FEI Number: 59-2624663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, ANTHONY
1555 NORTH PARK DRIVE
WESTON, FL 33326 US

Name and Address of New Registered Agent:

WALKER, ANTHONY
1555 NORTH PARK DRIVE
100
WESTON, FL 33326 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: _____

08/17/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALKER, ANTHONY,
Address: 780 REGAL COVE ROAD
City-St-Zip: WESTON, FL 33327

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: WALKER, SHARON S
Address: 11098 BISCAYNE BOULEVARD, #304
City-St-Zip: MIAMI, FL 33161

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: SHARON S. WALKER

D

08/17/2006

Electronic Signature of Signing Officer or Director

Date