

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04508

FILED  
Apr 09, 2007  
Secretary of State

Entity Name: ELLIOTT'S BUSINESS SERVICES, INC.

## Current Principal Place of Business:

13309 NW 7TH AVE  
MIAMI, FL 33168 US

## New Principal Place of Business:

## Current Mailing Address:

13309 NW 7TH AVE  
MIAMI, FL 33168 US

## New Mailing Address:

FEI Number: 59-2036896      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ELLIOTT, EDWARD D  
7255 NW 19TH CT.  
PEMBROKE PINES, FL 33024 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: ELLIOTT, EDWARD D,  
Address: 7255 NW 19TH CT.  
City-St-Zip: HOLLYWOOD, FL 33024

Title: VPTD ( ) Delete  
Name: ELLIOT, CAMILLA  
Address: 7255 NW 19TH CT.  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete  
Name: COOLS, KAREN  
Address: 7255 NW 19TH CT.  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete  
Name: COOLS, KISHA  
Address: 7255 NW 19TH CT  
City-St-Zip: PEMBROKE PINES, FL 33024

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: EDWARD D ELLIOTT

PSD

04/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date