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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

F94000002426 (4)

ELB-AMERICA, INC.

FILED
Apr 27 1998 8:00am
Secretary of State

1					
Principal Plac	e of Business	Mailing Address			8610 14045 05050 01010 0311 4801
6561 NW 181		6561 NW 18TH COURT			
FT. LAUDERDALE FL 33313 FT. LAUDERDALE FL 3331			3313		
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
				05/10/1994	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	H ata	26		06-1370392	Not Applicable
Suite, Apt.	#, BtC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & Stat	te	City & State		C. Fleeting Counciling Shapeing	
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the ci	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre			10, Name and Address of New Registered	Agent
BA	UR, THOMAS		81 Name		
) %8	BAUR, MILLER & WEBNER, P.A.		82 Street	Address (P.O. Box Number is Not Acceptable)	
10	O N. BISCAYNE BLVD., 21ST FL	al .	G. G.	Address (1.0. Dex Hamber to Not Hopepuble)	
ML	AMI FL 33132		83		
			84 City		85 Zip Code
				FI	L D COGE
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 La	am f am ifiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statutes.	poration's board of directors. Thereby accept the ap	ронитен аз гедізіогео
SIGNATURE					
	Signature, typed or printed name of registered ag		III : Registered Agent signature		
12.	OFFICERS AN	ID DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12 Change Addition
TITLE	HANS, HOHR	בן טבנכונ	1.1 TITLE		LT change LT Account
NAME	6561 NW 18TH COURT		1.2 NAME		
STREET ADDRESS	FORT LAUDERDALE FL		1.3 STREET ADDRESS		
CITY-ST-ZIP	S	□ DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	SCHIFF, URSULA B.		2.2 NAME		Change Nachton
STREET ADDRESS	6561 NW 18 COURT		2.3 STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL		2.4 CITY-ST-ZIP		
TITLE	CEO	DELETE	3.1 TITLE		Change Addition
NAME	DOERR, PETER	_	3.2 NAME		
STREET ADDRESS	8561 NW 18 COURT		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	at the second second	3 4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
GTREET ADDRESS	}		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DÉLET E	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 of 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 atjachment with an address.

SIGNATURE:

**ACCURATION OF The Property of the corporation of the receiver of 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 atjachment with an address.

SIGNATURE

**ACCURATION OF THE PROPERTY OF THE P