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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F94000002426

ELB-AMERICA, INC.

Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90006 010 ***150.00



Principal Plac	e of Business	Mailing Address						
6561 NW 18TH COURT FT. LAUDERDALE FL 33313 FT. LAUDERDALE FL 3331								
TI. ENDERFORE TE SOOT						DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed			
					05/10/1994			
Principal Place of Business Za. Mailing Address					4. FEI Number		plied For	
21		26			06-1370392		t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A		
22		27			3. Continued of Education Desired	Fee Re		
City & Stat	9	City & State	<u>-</u>		6. Election Campaign Financing	\$5:00		
23		28			Trust Fund Contribution	Added t	o Fees	
Zip	Country	Zip Country		8. This corporation owes the current year Intangible				
24	25	29	30		Personal Property Tax. Yes No			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent		
	ID 710140		j	B1 Name				
	IR, THOMAS	•	82 Street Addre		Address (P.O. Box Number is Not Acceptable)			
	AUR, MILLER & WEBNER, P.A.		L				_	
	N. BISCAYNE BLVD., 21ST FL.			B3				
MIAI	MI FL 33132			84 City		. 85 Zip C	Code	
				"	F			
office or a	registered agent, or both, in the State o am familiar with, and accept the obligati	f Florida. Such change was a	ithorized	by the corp	corporation submits this statement for the purpose oration's board of directors. I hereby accept the app	of changing its pointment as re	registered gistered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registered	gent signature	required when reinstating) DATE			
12.	OFFICERS AND		13.	•	ADDITIONS/CHANGES TO OFFICERS		_	
TITLE	PD	☐ DELETE		Ε		☐ Change	☐ Addition	
NAME	HANS, HOHR		1.2 NA	Œ				
STREET ADDRESS	6561 NW 18TH COURT		1.3 STF	EET ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CIT	/-ST-ZIP				
TITLE	\$ DELETE		2.1 111	Ε	s	🙀 Change	Addition	
NAME	SCHIFF, URSULA B.		2.2 NA	Æ	CRAIG HEDRICK			
STREET ADDRESS			2.3 STF	EET ADDRESS	6561 N W 18 Court			
CITY-ST-ZIP	FORT LAUDERDALE FL	من نو د د د	_ 2.4 C∏	Y-ST-ZIP	Mort Lauderdale. FL			
TITLE			3.1 TITI	E		☐ Change	Addition	
NAME	DOERR, PETER		3.2 NA	Œ				
STREET ADDRESS			3.3 ST	EET ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL			Y-ST-ZIP				
TITLE	I I LAUDENDALL I L	☐ DELETE	4.1 TIT			☐ Change	Addition	
NAME			4. 2 NA					
				EET ADDRESS				
STREET ADDRESS				(-ST-ZIP				
CITY-ST-ZIP		□ DELETE	5.1 T/I		 	Change	Addition	
TITLE			5.1 NA					
NAME				EET ADDRESS				
STREET ADDRESS	1							
CITY-ST-ZIP								
		□ BELETE		/-ST-ZIP		Change	☐ Addition	
TITLE		☐ DELETE	6.1 TIT	É		☐ Change	Addition	

14. I hereby 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

954 583 8200