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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G45832

(4)

ELITE SERVICE SYSTEMS, INC.

FILED	
Apr 27 1998 8:00am	1
Secretary of State	



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Principal Place of Business Mailing Address							r (Salific dans alant atranthias ittin if	B(B)+ B1B41	VIVI VIV 1		DI-DII 4801	
% JONATHAN S. LITTMAN % JONATHAN S. LITTMAN												
1821 S. S R 7				1821 S. S R 7				DO NOT WRITE IN THIS SPACE				
FT LAUDERDALE FL 33317 FT LAUDERDALE FL 33317					FL 33317			3. Date Incorporated or Qualified	IN ITIS S	SPACE		
								06/22/1983				
2. Principal P	iace of Busin	ness	2a.	, Mailing Addre	s s			4. FEI Number			App	lied For
21			26					59-2305597			Not	Applicable
! Suite, Apt.	#, etc.			Suite, Apt #.	etc.			5. Certificate of Status Desired				dditional
22			27									Inlied
City & State	θ		<u></u> ,	City & State				6. Election Campaign Financing	_			May Be
23			28	7:	1 0-			Trust Fund Contribution	<u> </u>			Fees
Zip 24		Country	-	Zip	├ ─	untry	,	8. This corporation owes or has pai	,			ngible No
24	o Name	and Address of Cu	29	tered Agent	30	т—		Personal Property Tax due June 10. Name and Address of New Re		Yes		IND
1.00				no ou Agoin		81	Name	to, Hally and Addies of Hos He	g.stb.00 /	ABOUT		
	T man , Joh 21 S . S R 7					_						
		LE FL 33317				82	Street Add	dress (P.O. Box Number is Not Acceptab	le)			ľ
F1		CE FL 33317				83						
						_				· · · · · · · · · · · · · · · · · · ·		
						84	City		FL	85	Zip C	ode
11. Pursuant	to the provis	ions of Sections 607	.0502 and 6	07.1508, Florida	Statutes, the a	boyı	i e-named coi	rporation submits this statement for the p		changir	na its	registered
office or r	egistered ag	jent, or both, in the S	tate of Florid	da. Such chang f. Section 607 0	e was authorize 505, Florida Sta	d by	the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	t the app	ointmen	t as r	egistered
SIGNATURE	ini (Q)))iiicii 441	in, and accept the c	ongudoris o	1, 00.60011 007.0	OOS, FIORIDE OLD	iuici	3.					
SIGNATURE	Signature, typed	or printed name of registers	dingeruland (4ko	if applicable	(NOTE: Registere	ed Age	ent signature requ	uired when reinstating)	DATE			
12.		OFFICERS	AND DIREC		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	DP			☐ DEL	ETE 11T	ITLE				☐ Char	nge	Addition
NAME		N, JONATHAN S			1.2 N	IAME						
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NAME					2.2 N							
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NAME	!				6.2 N	AME	}					
STREET ADDRESS					6.3 \$	TREET	ADDRESS					Ì
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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 articular 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, so on an altachment with an address.