

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

FILED

Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L06470** (3)
1. Corporation Name
ELITE TELECOM, INC.

Principal Place of Business % JOEL HORWITZ 20423 ST RD 7, STE 6103 BOCA RATON FL 33496	Mailing Address % JOEL HORWITZ 20423 ST RD 7, STE 6103 BOCA RATON FL 33496
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 08/01/1989	
				4. FEI Number 65-0138327	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**JOEL HORWITZ
23123 STATE RD 7
SUITE 245
BOCA RATON FL 33428**

10. Name and Address of New Registered Agent

81 Name	Joel Horwitz
82 Street Address (P.O. Box Number is Not Acceptable)	23257 STATE RD 7, STE 209
83	
84 City	BOCA RATON
85 FL	33428

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Joel Horwitz, President
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

4/6/98
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VTS	1.1 TITLE	
NAME	HORWITZ, JOEL	1.2 NAME	
STREET ADDRESS	11328 CHIPMUNK DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE:

Joel Horwitz
Signature typed or printed name of registered agent and title if applicable

4/6/98
DATE

CR2E034 (10/97)