FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	1996	DIVISI	ON OF CORPORAT	IONS		
DOCU 1. Corporatio	MENT # L8545	55 (8	3)			
ELL-BII	LL CORP.					
					A MAGNIBUK BER MAKAN BUKU AKARA BUK	I I BANA BUBU BARU BABU BUBU BUBU BUBU BUBU KABU
Principa! Piace	of Business	Mailing Address				
% ELEANOR GOLEMBESKI % ELEANOR GOLEMBESKI						
426 WOODLA	AKE LANE	≈ ELEANON GC 426 WOODLAKE				
DEERFIELD E	BEACH FL 33442	DEERFIELD BEA	CH FL 33442		3. Date Incorporated or Qualified	3a. Date of Last Report
					06/29/1990	05/01/1995
	ace of Business	F1	28. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# 010	26			65-0207971	Not Applicable
22	n, etc.	Surte, Apt. #,	etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			6. Election Campaign Financing	Fee Required
		28	28		Trust Fund Contribution	\$5.00 May Be Added to Fees
<i>Ζ</i> ιρ [22]	Country	Zφ	Country	/	8. This corporation has liability for	intengible tax under s. 199.032,
24	9. Name and Address of Curr	ent Posistavad Agent	30		Florida Statutes Yes	7-3
	or indired and Address of Odiff	ent negistered Agent	81	Name	10. Name and Address of New I	Registered Agent
GOLEMBESKI, ELEANOR						
426 WOODLAKE LANE			82	Street Add	lress (P.O. Box Number is Not Acceptal	ole)
	LD BEACH FL 33442		83			
			84	City		105 7 0
44 6			1	l '		FL 85 Zip Code
or register	o the provisions of Sections 607.050 ed agent, or both, in the State of Flo	J2 and 607.1598, Florida ∍rida. Such change was a	Statutes, the above i uthorized by the corp	named corpo oration's boa	ration submits this statement for the pured of directors. I hereby accept the app	rpose of changing its registered office
tamiliar wit	th and accept the oblightions of, So	glion (1)7.0505. Floridas	atutes.		and the control of th	ombredit as registered agent. Fam
SIGNATURE: 1	Signature, typicd or printed name of regularies	at and tille if applicable	(NOTE: Fingedward Age	it sumature recises	of when northwest	DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	
THE	DPT	☐ DELET	E 1. 1 1 1 1 1 1 E			Change Addition
NAME	GOLEMBESKI, ELEANOR		1.2 NAME	İ		
STREET ADDRESS CITY-S7-7IP	426 WOODLAKE LANE DEERFIELD BEACH FL		1.3 STREFT	1		
THE THE	DVS		14 CITY-S 2 1 TITLE	I - ZIF	· · ·	
NAME:	WASKIEWICZ, WILLIAM		2 2 NAME			Charige
STREET ADDRESS	426 WOODLAKE LANE		23 STREET	ADDRESS		3
CITY - S1 - ZIP	DEERFIELD BEACH FL		24 CHY-S			
THEE		☐ DELF I		···		☐ Change ☐ Addition
NAME			3.2 NAME			_
STREET ADDRESS			33 STREET	ADDRESS		
TITLE	- v . va to	DECET	3.4 CITY - S	1 - ZIP		
NAME		[] הבננוו	4 1 TITLE 4 2 NAME			☐ Change ☐ Addition
S1REET ADDRESS			4.2 NAME	ATIMELES		
CITY-ST-ZIP			4.4 CiTY-S	1		
11TLF		DELETI				Change Addition
NAME			52 NAME			_
STREET ADDRESS			53 STREET			
CHY-ST-ZIP THEE		ר) אין ביי	5 4 CHTY - S	1-7IP		
NAME		DELETE				Change Addition
STREET ADDRESS			62 NAM!	Annotes		
CHY-SI-7IP			6 3 STREET 6 4 CHTY-SI	ŀ		
	certify that the information supplied	with this filing is voluntari	y furnished and does	not quality fo	or the exemption stated in Section 119	OZ/G//b) Florida Statutos I fuelhos

SIGNATURE:

Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further cert fy 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.

GNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SKINING OFFICER OR DIRECTOR

Later Chapter 607.

Daytin e Phone #