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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # M25660

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ELYRON INVESTMENTS, INC.

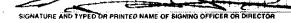
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May 09 1997 8:00am
Secretary of State



Poncipal Pla	coe of Business	Mailing Address			······································				
Principal Place of Business 828 NW 42ND AVENUE MIAMI FL 33126		13499 BISCAYNE BLVD APT 1708 N MIAMI FL 33181-2031							
		US				3. Date Incorporated or Qualified 01/10/1986 3a. Date of Last Report 05/01/1996			Report
2, Principa!	Place of Business	2a. Mailing Address 26				4, FEI Number 59-2735976			pplied For ot Applicable
Suite, Ap	t.#, etc	Suite, Apt #, etc.				5. Certificate of Status Desired	;	8.75	Additional equired
City & Str	ate	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00	May Be to Fees
Ζφ	Country	Zip	L	ıntry		8. This corporation has liability for in			. 199.032,
4	25	29	30			Florida Statutes 10. Name and Address of New Reg	Yes !		
	9. Name and Address of Cur	trent Hegistered Agent		81	Name	10. Name and Address of New Neg	listolon võt	HIL	
	LYAKIM, RONEN 1499 BISCAYNE BLVD APT 1701	Δ							
	ORTH MIAMI FL 33181	V	•	82	Street Addr	dress (P.O. Box Number is Not Acceptable)			
110	AUITI MISAMI I P 2010 I			83					
				84	Otto			e) 2in	Code
				64	City		FL '	is Zip	COOR
2.	Segranz, 19 as or printed none of registence OFFICERS	AND DIRECTORS	TE: Pegistere	o Age	rk signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFIC			
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nami:	ELYAKIM, RONEN	IT 4700	1.2 N						
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street address	S				ADDRESS				
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14. I do 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:



205-940-2100

Date

dirtie Phone #