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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

BONE	MENT n Name ) ELITE II	# M68; NCORPORATED	375	(8)			. 1863/118 (1941) 8 (1967) 1811/8 (1941) 18	AAL AKU DIRIA AADU ATAIY	#1#): B10:1 A10:1 (#2)
Principal Place of Business Mailing Address  12814 SW 112TH TERR MIAMI FL 33186 MIAMI FL 33186					RR				
					1 601 111				
							3. Date Incorporated or Qualified 02/10/1988	3a. Date of Last 04/21/	•
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		Applied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.				65-0034336		Not Applicable
22			27 27				5. Certificate of Status Desired		75 Additional e Required
City & State			City & State				6. Election Campaign Financing	□ \$5.	00 May Be
Zip 24		Country 25	Zip		Count	ry	Trust Fund Contribution  8. This corporation has liability for	intangible tax under	s 199.032,
		and Address of Curi	29 Pent Registered Age	nt	30	<del></del>		□ No	
	<u> </u>		Tent registered Age	311L		1 Name	10. Name and Address of New F	Registered Agent	
7IADIF	SALEEM 1	•				1			
ZIADIE, SALEEM T. 12814 SW 112TH TERR				82 Stre		Street Add	dress (P.O. Box Number is Not Acceptate	ole)	
	FL 33186	14-1111			8	3			
	5				ا	4 City			
44.5									Zip Code
	o the provisio	ins of Sections 607.05	02 and 607 1508. Fir	adala Okak da					
or registere	ed agent, or t	ooth, in the State of Flo	orida. Such change w	moa Statute /as.authorize	es, the above	named corpo	oration submits this statement for the pur	rpose of changing its	s registered office
familiar witi	ed agent, or the h, and accep	ooth, in the State of Flo t the obligations of, Se	orida. Such change w ection 607.0505, Flori	onoa Statute vas authorize da Statutes	es, the above ed by the col	n-named corpo rporation's boa	oration submits this statement for the pur and of directors. I hereby accept the app	rpose or changing its ointment as registers	s registered office ed agent. I am
familiar witi SIGNATURE	h, and accep	It the obligations of, Se	ection 607.0505, Flori ent and title if applicable.	da Statutes		i-named corporporation's boa	ard or directors. Thereby accept the appr	DATE	s registered office ed agent. I am
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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 manged, or on an attachment with an address.

CALLER T. ZIASIE) 4-15-86 3053833120 SIGNATURE: