2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2005 08:00 AM Secretary of State

DOCUMEN 1 # N9900001462 1. Entity Name ELN CONSULTANTS & ASSOCIATES, INC.					Secreta	ry of State
Principal Place of Business Mailing Address 960 N.E. 152ND STREET 960 N.E. 152ND STREET NORTH MIAMI BEACH, FL 33162 NORTH MIAMI BEACH, FL 331		62				
				04182005 No Chg-NP CR2E037 (10/03)		
DO NOT WRITE IN THIS SPACE			CE	FEI Number 65~0900836 Certificate of Status	Desired []	Applied For Not Applicable \$8.75 Additional Fee Required
	6. Name and Address of Current Reg		The same of the sa	Mental Carlo A.		
RANDLE-THOMPSON, ELLA 960 N.E. 152ND STREET NORTH MIAMI BEACH, FL 33162			DO NOT WRITE IN THIS SPACE			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or priviled name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE						
Filing Fee is \$61.25 Due by May 1, 2005 9. Election Campaign Finan Trust Fund Contribution.			· · · · · · · · · · · · · · · · · · ·	00 May Be ed to Fees		
10.	ÓFFICERS AND DIRI	ECTORS		The second secon	E. N. A.E.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RANDLE-THOMPSON, ELLA 960 N.E. 152ND STREET NORTH MIAMI BEACH, FL 33162				 .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AVANT, DEBRA L 960 N.E. 152ND STREET NORTH MIAMI BEACH, FL 33162			04/2	J0000034123 29/05-80007	35 ?-016 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RANDLE-DURANT, NANCY 960 N.E. 152ND STREET NORTH MIAMI BEACH, FL 33162			DO NO	T WRIT	E .
TITLE NAME	7		~	IN THIS	S SPAC	E

12. 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 report or supplemental 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CITY-ST-ZIP
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/05 (786) 3/7-7411 Dale Dayling Prone #