## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## ANNUAL REPORT ' DOCUMENT # P01000102088 1. Entity Name ELITE PROMOTIONS GROUP, INC.

Principal Place of Business

2152 NUREMBERG BLVD PORT CHARLOTTE, FL 33983 Maiting Address

2152 NUREMBERG BLVD PORT CHARLOTTE, FL 33983 FILED Jan 29, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01132007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

65-1148055

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Not Applicable

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HULL, BARBARA S 2152 NUREMBERG BLVD PORT CHARLOTTE, FL 33983

## DO NOT WRITE IN THIS SPACE

8. 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 printed name of registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating)  DATE					
	E NOWIII FEE IS \$150.00 ny 1, 2007 Fee will be \$550.00	Election Campaig     Trust Fund Contril		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HULL, BARBARA S 2152 NUREMBERG BLVD PORT CHARLOTTE, FL 33983				U00000007705
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD HULL, ROBERT D 2152 NUREMBERG BLVD PORT CHARLOTTE, FL 33983				U00000607738 01/31/07-80049-017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 certify 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 10 or Block 11 if					