

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

5/1

FILED
Jun 09, 2003 8:00 am
Secretary of State

05-01-2003 90157 020 ***150.00

DOCUMENT # P02000057059

1. Entity Name

ELITE ENTERPRISE LEGAL BUSINESS SOLUTIONS & TECHNOLOGIES, CORP.



Principal Place of Business
18455 MIRAMAR PARKWAY, STE. #210
MIRAMAR FL 33029

Mailing Address
18455 MIRAMAR PARKWAY, STE. #210
MIRAMAR FL 33029

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

460482570

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

PERTIERRA-MENDEZ, RALI
18455 MIRAMAR PARKWAY, STE. #210
MIRAMAR FL 33029

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 signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Delete
P
JARAVA-PERTIERRA, ROSARIO
STREET ADDRESS
18455 MIRAMAR PARKWAY, STE. #210
CITY-ST-ZIP
MIRAMAR FL 33029

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
V
PERTIERRA-MENDEZ, RALI
STREET ADDRESS
18455 MIRAMAR PARKWAY, STE. #210
CITY-ST-ZIP
MIRAMAR FL 33029

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
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TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rosario Jarava-Pertierra

06-25-03 904394528

CR2E034 (10/02)