

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000128486

**FILED**  
**May 13, 2008**  
**Secretary of State****Entity Name:** ELITE FARE, INC.**Current Principal Place of Business:**4320 SW 8ST  
CORAL GABLES, FL 33134**New Principal Place of Business:****Current Mailing Address:**825 ORTEGA AVENUE  
CORAL GABLES, FL 33134**New Mailing Address:**4320 SW 8 ST  
CORAL GABLES, FL 33134**FEI Number:** 41-2071250**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BROUWER, ELSA BEATRIZ  
220 MIRACLE MILE SUITE 203  
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**NADKARNI, SAMIR  
4320 SW 8 ST  
CORAL GABLES, FL 33134 US

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.

SIGNATURE: SAMIR NADKARNI

05/13/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P (X) Delete  
Name: BROUWER, RONALD  
Address: 825 ORTEGA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Delete  
Name: BROUWER, E. BEATRIZ  
Address: 825 ORTEGA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: P ( ) Delete  
Name: NADKARNI, SAMIR  
Address: 4320 SW 8 STREET  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMIR NADKARNI

P

05/13/2008

Electronic Signature of Signing Officer or Director

Date