

2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 18, 2004 8:00 am
Secretary of State

2/5

02-05-2004 90011 006 ***150.00

DOCUMENT # P03000006333

1. Entity Name
ELITE INVESTORS INC



Principal Place of Business Mailing Address
10766 HIDDEN BEND WAY **10766 HIDDEN BEND WAY**
WELLINGTON, FL 33414 **WELLINGTON, FL 33414**

66400~

2. Principal Place of Business 3. Mailing Address

State, Apt. #, etc. State, Apt. #, etc.

City & State City & State

Zip Country Zip Country



01112004 Chg-P CR2E034 (10/03)

4. FEI Number
01-0763194 Abstract Fee
 Not Applicable

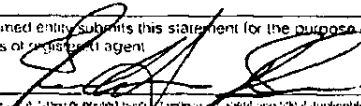
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
DHANNU, PURSHOTAM
10766 HIDDEN BEND WAY
WELLINGTON, FL 33414

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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:  **PURSHOTAM DHANNU** 02/09/04
NOTE: Registered Agent signature required when remaining. DATE

FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
After May 1, 2004 Fee will be \$550.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE S/T	DHANNU, PURSHOTAM <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
STREET ADDRESS CITY - ST - ZIP	10766 HIDDEN BEND WAY WELLINGTON, FL 33414	STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	V <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
STREET ADDRESS CITY - ST - ZIP	NARAIN, HEMAN 10766 HIDDEN BEND WAY WELLINGTON, FL 33414	STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	P <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
STREET ADDRESS CITY - ST - ZIP	DHANNU, RAGNAUTH 10766 HIDDEN BEND WAY WELLINGTON, FL 33414	STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
STREET ADDRESS CITY - ST - ZIP		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 furnished 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:  **PURSHOTAM DHANNU** 02/09/04 561-784-0085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE