

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000042812

**FILED**  
**Jul 18, 2007**  
**Secretary of State**

**Entity Name:** ELA PROFESSIONAL SERVICES, INC.

**Current Principal Place of Business:**

102 EAST 49 STREET  
HIALEAH, FL 33013

**New Principal Place of Business:**

8600 SW 47 TERRACE  
MIAMI, FL 33155

**Current Mailing Address:**

102 EAST 49 STREET  
HIALEAH, FL 33013

**New Mailing Address:**

**FEI Number:** 61-1449706

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ARAUJO, G. WALTER ESQ  
102 EAST 49 STREET  
HIALEAH, FL 33013 US

**Name and Address of New Registered Agent:**

ARAUJO, WALTER  
102 EAST 49 ST  
HIALEAH, FL 33013 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: WALTER ARAUJO

07/18/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ARAUJO, ELIZABETH L  
Address: 102 EAST 49 STREET  
City-St-Zip: HIALEAH, FL 33013

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

Title: D (X) Change ( ) Addition  
Name: ARAUJO, ELIZABETH L  
Address: 8600 SW 47 TERRACE  
City-St-Zip: MIAMI, FL 33155

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: ELIZABETH ARAUJO

MRS

07/18/2007

Electronic Signature of Signing Officer or Director

Date