
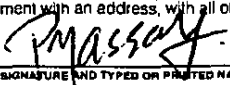


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2004 8:00 am
Secretary of State

05-24-2004 90004 012 ***158.75

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|---|--|---|---|
| DOCUMENT # P03000060845 | |  | |
| 1. Entity Name ELISA FASHION DESIGNS, CORP. | | | |
| Principal Place of Business 3234 33RD NORTH AVE ST PETERSBURG, FL 33713 | | Mailing Address 3234 33RD NORTH AVE ST PETERSBURG, FL 33713 | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |
| 4. FEI Number 51-0474908 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fees Required | |
| 6. Name and Address of Current Registered Agent LEON, JOSE 6012 SANDHILL RIDGE DR. LITHIA, FL 33547 | | 7. Name and Address of New Registered Agent Name PEDRO J. NASSAR Street Address (P.O. Box Number is Not Acceptable) 3234 33RD NORTH AVENUE City ST. PETERSBURG FL 33713 | |
| 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  Pedro J. NASSAR DATE 4/14/2004 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD LEON, JOSE 6012 SANDHILL RIDGE DR. LITHIA, FL 33547 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD NASSAR, PEDRO J 6012 SANDHILL RIDGE DR. LITHIA, FL 33547 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PEDRO NASSAR 3234 33RD NORTH AVENUE ST. PETERSBURG FL 33713 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD SALGADO, OCTAVIO J 6012 SANDHILL RIDGE DR. LITHIA, FL 33547 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD SANTOS, EDUARDO E 6012 SANDHILL RIDGE DR. LITHIA, FL 33547 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition EDUARDO E. SANTOS 3234 33RD NORTH AVENUE ST. PETERSBURG FL 33713 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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:  Pedro J. NASSAR | | Date 04/19/04 (237) 576-2795 | |