

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000093375

FILED  
Jul 07, 2007  
Secretary of State

Entity Name: ELITE EVENTS INC.

**Current Principal Place of Business:**

3389 SHERIDAN ST  
266  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

3389 SHERIDAN ST  
266  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 27-0066672      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PAMELA, BLACO  
3389 SHERIDAN ST  
266  
HOLLYWOOD, FL 33021 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BLACO, PAMELA  
Address: 3389 SHERIDAN ST #266  
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP ( ) Delete  
Name: BLACO, CLYDE  
Address: 3389 SHERIDAN ST #266  
City-St-Zip: HOLLYWOOD, FL 33021

Title: T ( ) Delete  
Name: BLACO, PAMELA  
Address: 3389 SHERIDAN ST # 266  
City-St-Zip: HOLLYWOOD, FL 33021

Title: S ( ) Delete  
Name: BLACO, CLYDE  
Address: 3389 SHERIDAN ST #266  
City-St-Zip: HOLLYWOOD, FL 33021

**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:

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: PAMELA BLACO

P

07/07/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date