

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087092

Entity Name: ELMS INVESTMENT GROUP, INC.

FILED  
Mar 07, 2006  
Secretary of State

## Current Principal Place of Business:

10720 SW 10 CT  
DAVIE, FL 33324

## New Principal Place of Business:

## Current Mailing Address:

10720 SW 10 CT  
DAVIE, FL 33324

## New Mailing Address:

P.O. BOX 22842  
FT LAUDERDALE, FL 33335

FEI Number: 54-2153387

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUPREE, SHARON O  
133 RIVERA CIR  
WESTON, FL 333263112 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DIBLASI, MICHAEL  
Address: 425 SE 11 TER #103  
City-St-Zip: DANIA, FL 33004

Title: D ( ) Delete  
Name: CHOLAKIS, LEON W  
Address: PO BOX 26 7592  
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete  
Name: DUPREE, SHARON O  
Address: 133 RIVERA CIR  
City-St-Zip: WESTON, FL 333263112

Title: D ( ) Delete  
Name: MARIN TORRES, ELYFREDO  
Address: 10720 SW 10 CT  
City-St-Zip: DAVIE, FL 33324

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DIBLASI, MICHAEL  
Address: 4810 TYLER STREET  
City-St-Zip: HOLLYWOOD, FL 33021

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 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: SHARON O DUPREE

D

03/07/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date