## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000093400

Entity Name: ELI ASHER INC

FILED Jan 28, 2009 Secretary of State

Entity Nai	me: ELIASHI	ER INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
2740 SW MARTIN DOWNS BLVD #209 PALM CITY, FL  34990				2293 SW DOVE CANYON WAY PALM CITY, FL 34990		
Current Mailing Address:			New Maili	New Mailing Address:		
#209	MARTIN DOW Y, FL 34990	NS BLVD				
FEI Number	: 75-3158787	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	l Address of (	Current Registered Agent:	Name and	Address of	New Registered Agent:	
2293 SW [	, ELAINE S P DOVE CANYO Y, FL 34990	N WAY US				
	named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	nic Signature of Registered Age	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SANDOW, ELA	E CANYON WAY	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( HARRY, AMY E 3271 SW BICC PALM CITY, FL	PA PLACE	Title: Name: Address: City-St-Zip:	HARRY, AMY 33 RIO VISTA		
Title: Name: Address: City-St-Zip:	SANDOW, ELA	E CANYON WAY	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name:	T ( HARRY, AMY E	) Delete	Title: Name:	T ( HARRY, AMY	(X) Change()Addition 「B	

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.

Address:

City-St-Zip:

33 RIO VISTA DRIVE

SEWALLS POINT, FL 34996

SIGNATURE: ELAINE S SANDOW ESS 01/28/2009

3271 SW BICOPA PLACE

PALM CITY, FL 34990

Address:

City-St-Zip: