2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000130210

lame: ELITE INVESTIGATION & SECURITY SERVICES INC

FILED Feb 13, 2007 Secretary of State

Entity Name: ELITE INVESTIGATION & SECURITY SERVICES INC.							
Current Principal Place of Business:				New Principal Place of Business:			
	H STREET SU AD, FL 33030						
Current Mailing Address:				New Mailing Address:			
125 NE 8TH STREET SUITE 2 HOMESTEAD, FL 33030				P.O. BOX 901388 HOMESTEAD, FL 33090			
FEI Number:	20-1635454	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desir	ed()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US				BELLIS, TIMOTHY A 125 NE 8TH STREET #2 HOMESTEAD, FL 33030 US			
The above in the State		submits this statement for the	e purpose o	f changing i	ts registere	d office or registered agent	, or both,
SIGNATURE: TIMOTHY A BELLIS				02/13/2007			
		ic Signature of Registered A	gent			Date	
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () BELLIS, TIMOT 125 NE 8TH ST HOMESTEAD, F	REET SUITE 2		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	V () NIEVES, RAFAU 125 NE 8TH ST HOMESTEAD, F	REET SUITE 2		Title: Name: Address: City-St-Zip:	V JAMES, NE 17030 S. DI MIAMI, FL	XIE HIGHWAY	
Title: Name: Address: City-St-Zip:	T () BELLIS, HAROI 125 NE 8TH ST HOMESTEAD, F	REET SUITE 2		Title: Name: Address: City-St-Zip:		() Change () Addition	

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: TIMOTHY A BELLIS P 02/13/2007