

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165777

FILED
Mar 28, 2006
Secretary of State

Entity Name: ELITE CARRIERS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

11790 S.W. 18TH STREET
APT.# 129
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

11790 S.W. 18TH STREET
APT.# 129
MIAMI, FL 33175

New Mailing Address:

FEI Number: 20-2061950 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORALOBO, ALBERTO A P
11790 S.W. 18TH STREET
APT.# 129
MIAMI, FL, FL 33175 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: P () Delete
Name: MORALOBO, ALBERTO A P
Address: 11790 S.W. 18TH STREET, APT. 129
City-St-Zip: MIAMI, FL 33175

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: MORALOBO, SONYA
Address: 11790 SW 18 STREET, APT. 129
City-St-Zip: MIAMI, FL 33175 US

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: ALBERTO A MORALOBO

P

03/28/2006

Electronic Signature of Signing Officer or Director

_____ Date