

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000140445

Entity Name: ELITE CONCEPTS AND DESIGN, INC.

FILED
Oct 09, 2007
Secretary of State

Current Principal Place of Business:

9524 TROPICAL PARK PLACE
BOCA RATON, FL 33428

New Principal Place of Business:

4751 NEAL RD
FORT MYERS, FL 33905 US

Current Mailing Address:

9524 TROPICAL PARK PLACE
BOCA RATON, FL 33428

New Mailing Address:

4751 NEAL RD
FORT MYERS, FL 33905

FEI Number: 20-5707463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIRICHELLO, JENNIFER
9524 TROPICAL PARK PLACE
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

CHIRICHELLO, JENNIFER
4751 NEAL RD
FORT MYERS, FL 33905 US

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: JENNIFER CHIRICHELLO

10/09/2007

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: D () Delete
Name: CHIRICHELLO, JENNIFER
Address: 9524 TROPICAL PARK PLACE
City-St-Zip: BOCA RATON, FL 33428

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: CHIRICHELLO, JENNIFER
Address: 3044 LAKE MANATEE CT
City-St-Zip: CAPE CORAL, FL 33909

Title: D/VP () Change (X) Addition
Name: JOHNSON, JAMES R
Address: 4751 NEAL RD
City-St-Zip: FORT MYERS, FL 33905

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: JAMES R. JOHNSON

D/VP

10/09/2007

Electronic Signature of Signing Officer or Director

Date