## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 05 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000015110 (8)

AN ELEGANT AFFAIR, INC.

Principal Place of Business

226 N.W. 152 LANE PEMBROKE PINES FL 33028		226 N.W. 152 LANE PEMBROKE PINES FL 33028-1818					
US		US			3. Date Incorporated or Qualified 02/22/1993	3a. Date of Las	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		65-0394733		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #. etc.		5. Certificate of Status Desired		5 Additional Required	
City & State		City & State			<del></del>		
23		28		Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Feos	
Zip Country		Zip Country		8. This corporation has liability for			
24 25		29 30		Florida Statutos			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
TIRO	NE, ROSINA	•		Name	ROSINA TIRONE		
6637	SHERATON DRIVE			32 Street Address (P.O. Box Number is Not Acceptable)			
MIRA	MAR FL 33025			17011 N. W. 20 STREET			
			83	3			
(ac	ldress change)		84	CIV	BROKE PINES		ip Code
11. Pursuant t	o the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the abov	ve-named con	ogration submits this statement for the r		33028
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE ROSINA TIRONE Signature, typed or printed name of registered agent and title if applicable (NOTL Registare Agent signature required when reinstating)						DATE 4/2	5/97
12.	OFFICERS AND		18.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PTD	<b>XIXI</b> MUELETE	1.1 TITLE			Chang	ge 🔲 Addition
NAME	TIRONE, JENNIFER		1.2 NAME				
STREET ADDRESS			1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIRAMAR FL 33023	Пост	1.4 CITY-	ST-7/P			1 1199
TITLE	V\$D	□ DETETE	21 1ITLE				ge 🔲 Addition
NAME >	MORGAN, CURTISS 226 N.W. 152 LANE		2 8 NAME	Ì			
STREET ADDRESS	PEMBROKE PINES FL		1	1 ADDRESS			
CITY-ST-ZIP TITLE	PTD PTD	DELFTE	2 4 CITY 3 1 THLF	-SI-7IP		Chanc	ge Addition
NAME	MORGAN, JENNIFER	[ Ott. 1	3.2 NAME			L Guard	je Roditon
STREET ADDRESS	444 1111 444 1415			1 ADDRESS			
CITY-ST-ZIP	PEMBROKE PINES FL		3.4. CHY-SI-7P				
TITLE			4.1 1111.1	31.11		Chang	ge Addition
NAME			4. 2 NAM	F .			
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY				
TITLE			5.4 TOLE			Chang	ge Addition
NAME			5.2 NAME				
STREET ADDRESS			5.8 STREE	1 ADDRESS			ļ
CITY-ST-ZIP	5.41		5.4 CITY -	S1-7IP			
TITLE		☐ DELETE 6.1				Chang	ge Addition
NAME			6.2 NAME				
STREET ADDRESS			6 B STREE	1 ADDRESS			
CITY-ST-ZIP			6.4 CITY-	S1 - 7(P			
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplicmental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director for the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an altachment with an address.							

GENATURE, MM AL A CONTINUE JENNIFER MORGAN, PRESIDENT 4/25/97 (954)704-087