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

Mailing Address 6147 9TH AVE CIR NE

BRADENTON FL 34202-9561

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1997 8:00am

Secretary of State

3a. Date of Last Report

941 925-2049

3. Date Incorporated or Qualified

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000020784 (3)

AELESH CORP.

Principal Place of Business

6147 9TH AVE CIR NE

BRADENTON FL 34202

SIGNATURE:

STE - 6

03/15/1993 02/26/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0395806 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 29 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GARDI, LES 7061 S TAMIAMI TRAIL 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 110 83 SARASOTA FL 34231 84 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. □ DELETE Change ___ Addition 1.1 TITLE TITLE **ELES, GYULA** 1.2 NAME NAME 4526 26TH ST W 1.3 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34206** 1.4 City-St-ZIP DITY-ST-ZIF DELETE Addition 21 TITLE Change TITLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY ST-ZiP DELETE Change Addition 31 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY - \$1 - ZIP DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - S1 - ZIP Addition DELETE 5.1 TITLE Change TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP Change ___ Addition TITLE DELETE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 supplemental 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 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 in Flock 12 or Block 13 if changed, or on an attachment with an address.