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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000035353 (0)

ELITE WORLDWIDE INVESTIGATIONS INC.

FILED Jan 27 1997 8:00am Secretary of State



Principal Fla	ace of Business	Mailing Address								
3315 N.W. 7TH STREET MIANI FL 33125		3315 N.W. 7TH STREET MIAMI FL 33125-4103			:					
						3. Date incorporated or Qualified 3a. Date of 05/17/1993 07/02/			of Last Report	
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number	1 <u>Y-1.</u> Z.		Applied For	
1		26				65-0412537			Not Applicab	
State, Ap	nt #, લોઇ	Suite, Apl. #, etc. 27	27			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & St	tate	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	Zip	Cou	ıntry		8. This corporation has liability for in		ax under	s. 199.032,	
4	25	29	30	·····				No No		
	9, Name and Address of Curr	ent Registered Agent		ļ		10. Name and Address of New Reg	istered A	gent		
MI	ugarra, Gilfredo			81	Name					
	315 N.W. 7TH ST. IAMI FL 33125		82 Street A			lress (P.O. Box Number is Not Acceptable	(e)		··········	
(41)	Rum (E 001E0			83						
				84	City	***************************************	FL	85 Z	p Code	
agent SIGNATURI 12.	E from from the first of the state of	iden: and the appearable (NO IND DIRECTORS				poration submits this statement for the pution's board of directors. I hereby acception when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE			
TiTLE	D	☐ DELETE	117	ITLE		***************************************		Change	e Additio	
NAME	MUGARRA, GILFREDO		12 N	IAME						
STAFET AUDRES			138	TREET	ADDRESS					
OTY-51-7.P	MIAMI FL 33125		140	IIY-S	T-ZIP					
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CITY - ST - ZIP	1			HTY -S						
series of 1 of						od in Section 119 07(3Vi). Florida Statutes			· · · · · · · · · · · · · · · · · · ·	

4. Lab hercely 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 armual 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 Block 12 or Block 13 is changed, or or an attachptent with an address.

SIGNATURE:

THE AND TYPED OR PRINTED NAME OK GIGHING OFFICER OR DIRECTO

1-17-57 (35) 553-1736