FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # P93000056524 (0)

FITTE ALITO ENTERPRISES INC

Principal Place of Business Mailing Address 1873 S SR 7 FT LAUDERDALE FL 33317 ELLITE AUTO ENTERPRISES, INC. Mailing Address 1873 S SR 7 FT LAUDERDALE FL 33317			99917						
14 CHOUCHE	vnee it woir	FI LAUDENDALE FL	3331 f			3. Date Incorporated or Qualified		te of Last R	
2 Principal Bl	ace of Business	To- Mainer Address	·			08/11/1993 4. FEJ Number	()5/01/199	
21 - Frincipal Fri	ace or business	2a. Mailing Address 26						J	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				65-0428704			Additional
22		27				5. Certificate of Status Desired			Required
City & State	e	Orty & State				Election Campaign Financing Trust Fund Contribution			O May Be
Zip	Country	Zip	I Cou	untry		8. This corporation has liability for it	ntanoible i		to Fees
24	25	29	30	,		Florida Statutes Yes		erx unider \$	199.002,
	9. Name and Address of Cur	rent Registered Agent		Ī		10. Name and Address of New R	egistered	Agent	
				81	Name				
PETTIS,				82	Street Addr	ess (P.O. Box Number is Not Acceptabl	le)		
	STATE ROAD 7			83					
FT LAU	DERDALE FL 33317			03					
				84	City		FI	85 Zıp	o Code
SIGNATURE .	Signature, typed or printed the cool regulatived a OFFICERS /	AND DIRECTORS	13.		t signature require	Lorente restating: ADDITIONS/CHANGES TO OFF			·
TITLE	DS	DELETE	1 1 1					Change	Addit:on
NAME STREET ADDRESS	PETTIS, ELOISE		12 N		ADDRESS				
CITY-ST-Z-P	1873 S. STATE ROAD 7 FT. LAUDERDALE FL			IHEE: ITY-Si	- 1				
TITLE	PO	☐ DELETE	2 1 I					☐ Change	Addition
NAME	PETTIS, WILLIE J		2 2 N	AME				= -	_
STREET ADERESS	1873 S SR 7				ADDRESS				
TITLE	FT LAUDERDALE FL	DELETE	·····-	1Y-S1	915-1				
NAME		ריין מניננונ	3 1 I 32 N					☐ Change	Addition
STREET ADDRESS					ADDRESS				
CITY - ST-Z-P				ITY-SI					
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NAME			4 2 N	AME					
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STREET ADDRESS			52 N		ADDRESS				
CITY-ST-ZIP				ine≥i •TY÷S1	1				
TITLE		DELETE	6 1 7		1-rif			☐ Change	Addition
NAME			CON						

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS 64 CITY - ST - ZIF

SIGNATURE: 4

STREET ADDRESS

Daytme Phone #