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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P94000028943 (6) DOCUMENT #

1. Corporation Name

ELLING, INC.

4822 GRANADA BLVD.	%NORMAN T. ROBERTS, P.A.
Principal Place of Business	Mailing Address



	Business	Mailing Address						
4822 GRANADA BLVD. CORAL GABLES FL 33146		50 W. MASHTA	%AYORMAN T. ROBERTS. P.A. 50 W. Mashta Dr., Suite 2 Key Biscayne Fl 33149		3. Date Incorporated or Qualified		e of Last F	
					04/15/1994	0	2/23/19	95
2. Principal Place	of El reinnee	2a. Mailing Addres	SS		4. FEI Number 65	-0487	512	Applied For
I ALFRE		06 26 169 E	FLAGUER	-Street	APPLIED FOR	·		Not Applicable
Suite, Apt. #,		Suite, Apt. #, 6	etc.		5. Certificate of Status Desired			5 Additional
2 Sout	1616	27			3. Communic of Claims Desired			Required
City & State		Oity & State			6. Election Campaign Financing			00 May Be
3 MIAN	4 /L	28			Trust Fund Contribution			ed to Fees
Zip	Country	Zip	├ ¬	intry	This corporation has liability for Florida Statutes		ax under s	199.032,
4 331:		29	30		10. Name and Address of New	_	Agent	
	g. Name and Address of Cur	rent negistered Agent		81 Name	10.			
					(D.O. Day May hos o Not Accords	bloi		
	, NORMAN L ESQ.			82 Street Addr	ress (P.O. Box Number is Not Accepta	iD ₁ e _j		
	SHTA DR.			83	<u></u>			
SUITE 2	AVNE EL 22440			<u> </u>			85 4	Zip Code
	AYNE FL 33149			84 City		FI	1 1 1	•
11 Pure lant to	the provisions of Sections 607.0	0502 and 607,1508, Florida	Statutes, the ab	ove named corpor	ration submits this statement for the pard of directors. Thereby accept the ap	urpose of cl	hanging its	registered office
or registered	agent, or both, in the State of	lorior Such change was a	authorized by the Statutes	corporation's boa	ard of directors. I hereby accept the ap	ровшиели с	is registere	o agent. ram
	and acceptine deligations of	1/2	Norma	in T. Rot	oerts .	2146	16	
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certify that the information indicated on this armost report of supplemental armost report is troe and accurate and that hy sign oath; that I am an officer of director of the corporation or the receiver or trustee empowered to execute this report as required appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: