PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000070999 (5)

E.L.D. ENTERPRISES, INC.

Principal Plac	e of Business	Mailing Address		· · · · · · · · · · · · · · · · · · ·		JEH BUHA HAHD HEH	
7930 NW 36 ST 23-176 Miami Fl 33166 US		R-1521 PO BOX 02-5330 MIAMI FL 33102-5330 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
~		00			09/27/1994		
2. Principal P	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0522618	 	plied For I Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A Fee Red	
City & Stat		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 (Added to	
Zip			Countr	У	8. This corporation owes or has paid the current year Intangible		
24	25 Name and Address of Curre	29	30		Personal Property Tax due June 30. 10. Name and Address of New Registere.] No
NC NC		ent registered Agent	81	Name	10, Haille and Address of New Registere	a Agent	
	JESUS, RAYSA C. 30 NW 36 ST			<u> </u>			
	E 23-176		82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
1	AMI FL 33166		83				
			84	City	F	85 Zip C	Code
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Starm familiar with, and accept the obli-	te of Florida. Such change was gations of, Section 607.0505, F	authorized b lorida Statute	y the corpor es.	orporation submits this statement for the purpose ration's board of directors. I hereby accept the appared when reinstaling) DATE DATE	of changing its opointment as r	s registered registered
12.		ND DIRECTORS	13.	, o g	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS	\$ IN 12
TITLE	P	☐ DELET e	1.1 11TLE			Change	Addition
NAME	DEJESUS, EDWIN		1.2 NAME				
STREET ADDRESS	7930 NW 36 ST #23-176			T ADDRESS			
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	1.4 CiTY- 2.1 TITLE	ST-7IP		Change	Addition
NAME			2.2 NAME				, riagilion
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			2. 4 CITY-				
TITLE		☐ DELETE	3.1 1ITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CHY- 4.1 TITLE	ST-ZIP		Change	Addition
NAME		L. Decen	4. 2 NAME	:		En Ontainge	/idustron
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CITY-	ST-ZIP		Chanan	Additon
TITLE		☐ DELETE	6.1 THTLE			Change	Addition
NAME STREET ADDRESS			6.2 NAME 6.3 STREE	T ADDRESS			

14. I 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 Block 12 or Block 13 if changed or on an atlaction my with an address.

6.4 CITY - ST - ZIP

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FILED

Apr 27 1998 8:00am

Secretary of State

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