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PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P94000070999

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90005 015 ***150.00

E.L.D. EI	NTERPRISES, INC.			¢ (00;100) 110 10;11 0;0); 00;11 0	0.111	(10 (11(6 (10) 111)
Principal Place	e of Business	Mailing Address		4	### ##################################	110 10115 tot 1991
7930 NW 36 ST	ī	R-1521				
23-176 PO BOX 02-5330				DO NOT WR	ITE IN THIS SPACE	
MIAMI FL 33166 MIAMI FL 33102-5330 US US			3. Date Incorporated or Qualifed		<u> </u>	
03		00		09/27/1994		
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	<u> </u>	Applied For
21 7801 NW 37 TH STREET 26				65-0522618		Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75	Additional
22		27		5. Certificate of Status Desired	Fee	Required
City & State	e	City & State		6. Election Campaign Financing		0 May Be
23 MIA1		28		Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zip	Country	8. This corporation owes the cu	rent year Intangible ☐ Yes	□No
24 331(06 25 U.S.	11	0	Personal Property Tax. 10. Name and Address of New		
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Addices of New	regional rigains	
DE J	IESUS, RAYSA C.			in a second seco	1-1-1	
	NW 36 ST		82 Street A	ddress (P.O. Box Number is Not Accep	STREET	
STE	23-176		83	7 14 00 00 1111	<u> </u>	
MIAN	/II FL 33166					- Codo
			84 City M	HAMI	FL 85 Z	p Code 33 166
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the shave named or	amoration cultimite this statement for the	purpose of changing	its registered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	t Florida. Such change was aut	norized by the corbor	ation's board of directors. I hereby acce	ept the appointment as	registered
LEIGNATURE						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	legistered Agent signature req		DATE	
12.	OFFICERS AND	DIRECTORS	13.	uired when reinstating) ADDITIONS/CHANGES TO O	FFICERS AND DIREC	
12. TITLE	OFFICERS AND		13.			
12. TITLE NAME	OFFICERS AND P DEJESUS, EDWIN	DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO O	FFICERS AND DIREC	
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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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR