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

PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1. Corporation Name
ELITIDA INVESTMENT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

P	94	00	00	75	65	9 (	( <b>0</b> )	
								,

## FILED Aug 05 1998 8:00am Secretary of State

	RA INVESTMENT CORP.	0070000 (0	,			
· ·	ce of Business	Mailing Address			* ********* **** ***** ****** ****** ****	nen elitar metar metar átrik íðit eligt
125 S.W. 107TH AVENUE 125 S.W. 107TH AVENUE MIAMI FL 33174					DO NOT WRITE IN	TUI <b>C C</b> DACE
					3. Date Incorporated or Qualified	I III S SFACE
					10/14/1994	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0538158	Not Applicable
Suite, Apt	. #, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & Sta	te	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution		
Zip	Country	Zip	ı	intry	8. This corporation owes or has paid the	
24	25   9. Name and Address of Curre	129 Agent	30		Personal Property Tax due June 30.  10. Name and Address of New Regist	Yes No
9/	OMOZA, JULIO	Brancham ViBrant		81 Name	101 LINE AND LINE OF THE LINE LINES.	oran Main
	25 <b>S.W</b> . 107TH AVENUE				700 p. 11	
	IAMI FL 33174			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
****				83		
				84 City		10-1 7: 0-1:
						FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	tes, the al	pove-named cor	poration submits this statement for the purpo	ose of changing its registered
agent La	am f <b>a</b> miliar with, and accept the oblig	ations of, Section 607.0505, F	autnorize Iorida Stat	d by the corpora lutes.	poration submits this statement for the purportion's board of directors. I hereby accept the	e appointment as registered
SIGNATURE						
12,	Signature, typed or printed name of registered ag-	ent and title if applicable (NO ID DIRECTORS		d Agent signaturo requi		ATE
TITLE	D /	DELETE	13.	TI C	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	SOMOZA, JULIO		1.2 N/			Change Addytion
STREET ADDRESS	125 S.W. 107TH AVENUE			REET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33174			TY+S1-ZIP		
TITLE	VP	☐ DELETE	2.1 30			Change Addition
NAME	REYNALDO AROSTEGUI		2.2 NA	AME		
STREET ADDRESS	125 SW 107TH AVE		2.3 ST	REET ADDRESS		
CITY-ST-ZIP	MAMI FL		2.4 C	ITY-ST-ZIP		
TITLE	8	DELETE	3.1 TI	TLE		Change Addition
NAME	ALFREDO AMADOR	=	3.2 NA			•
STREET ADDRESS	5617 SW 142ND S. T. PLAC	<b>:</b>	1	REET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	_	TY-ST-ZIP		Change 14439
NAME			4.1 TO			☐ Change ☐ Addition
STREET ADDRESS			4. 2 N			
CITY-ST-ZIP	,			REET ADDRESS TY-ST-ZIP		•
TITLE		DELETE	5.1 117			Change Addition
NAME		_	5.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				IY-ST-ZIP		
TITLE		DELETE	6.1 TIT			Change Addition
NAME			6.2 NA	ME	•	
STREET ADORESS			6351	REET ADDRESS		
CITY-ST-ZIP	L			Y-ST-ZIP		
14. I hereby o	certify that the information supplied w	ith this filing does not qualify f	or the exe	nption stated in	Section 119.07(3)(i), Florida Statutes, I furth	er certify that the information

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 suppliermental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation of the receiver of trustee emphysical 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 or an attachment with an address.

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