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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400079919 (4) ELITE ACCOUNTING SERVICES INC.

FILED
May 08 1998 8:00am
Secretary of State

Principal Place 8456 NW 16 MIAMI FL 30		Mailing Address 8456 N.W. 190 TERR MIAMI FL 33015					IL 16060 1017 1007			
		U\$				DO NOT WRITE IN 3. Date Incorporated or Qualified	THIS SPACE		٦	
						10/31/1994			l	
	Place of Business	2a. Mailing Address				4. FEI Number		Applied For	1	
21		26				65-0534467		Not Applicable		
Suite, Apt	. #, etc.	Suito, Apt. #, etc.	¬ ' ' '			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & Sta	te	City & State	\neg '			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	Country	Zip	Coun			8. This corporation owes or has paid the current year Intangible				
24	25 25 9. Name and Address of Currel		30			Personal Property Tax due June 30. 10. Name and Address of New Regist		∐ No	ł	
A	NA I. CASANOVA		- 10	B1 (Name	19. Hamo are Addition of their fregue	orea regent		1	
9641 S.W. 4TH STREET			ļ.	82 Street Address (P.O. Box Number is Not Acceptable)					ł	
MIAMI FL 33172			L					· · · · · · · · · · · · · · · · · · ·		
			*	33						
			[84	City		FL 85 Z	ip Code		
11. Pursuant office or	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations of the colors.	22 and 607, 1508, Florida Statute of Florida, Such change was a ations of Section 607, 0505, Flo	es, the about the state of the	ove-r	named corpor he corporatio	ration submits this statement for the purpon's board of directors. I hereby accept the	ose of changing appointment	g its registered as registered		
SIGNATURE	arrivaring with and decept the cong	and 10 01, 5001(01 001,0000, 110	7100 01010	105.						
Signature, typed or printed name of registered agent and little if applicable (NOTE: Register					stered Agent signature required when reinstating) DATE					
12.	OFFICERS AN			13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT		Š	
NAME	DIAZ, MARIA I		1.2 NAM				L_T Owning	N E ABOMON	3	
STREET ADDRESS	O ARA MM ANTU TON			1.3 STREET ADDRESS					8	
CITY-ST-ZIP	MIAMI FL 33015		1.4 CffY	Y-ST-	ZIP				Š	
TITLE	D			.E			Chang	e 🔲 Addition	Č	
NAME	DIAZ, BERNARO		2.2 NAM	2.2 NAME 2.3 STREET ADDRESS						
STREET ADDRESS	% 8456 NW 190TH TER								Ì	
CITY-ST-ZIP TITLE	MIAMI PL 33015			2 4 CITY-ST-ZIP			Chang	e Addition		
NAME		DELETE			1		C) Maily	v LIADUROR,	ĺ	
STREET ADDRESS			3.3 STR		OORESS					
CITY-ST-ZW			3.4. ÇITY							
TITLE		☐ DELETE	4.1 TATE	E			Chang	e 🔲 Addition	ĺ	
NAME	l		4. 2 NAA	ME	ļ					
STREET ADDRESS			4.3 STR	EET AD	XXRESS				ĺ	
CITY-ST-ZIP		T beleve	4.4 CITY		ZIP		[] Ot			
TITLE		[] DELETE	5.1 111(1				Chang	e 🔲 Addition	ĺ	
NAME STREET ADDRESS			5.2 NAM		voncee				ĺ	
CITY-ST-ZIP	1		5.3 STRE 5.4 CITY							
TITLE		DELETE	5.4 CHY 6.1 TITL		Tat.		Chang	e Addition		
NAME	1		6.2 NAM		1					
STREET ADDRESS			6.3 STR		DORESS					
CITY-ST-ZIP	<u> </u>		6.4 CITY		i i				ĺ	
14. I hereby	certify that the information supplied w	ith this filing does not qualify to	r the exen	nptio	n stated in Se	ection 119.07(3)(i), Florida Statutes. I furth	her certify that t	he information	ĺ	

14. I hereby certify that the information supplied with this filling 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 changes for on an absorbing must be needed to execute this report as required by Chapter 607.

SIGNATURE: Mais Nova Naria T. SAZ President 4/28/98 (305) 590