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May 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000083945 (3)

1. Corporation Name

ELLAINE CHARLES, INC.

Principal Place of Business

Mailing Address

802 LAKE SHORE DR
DELRAY BEACH FL 33444

802 LAKE SHORE DR
DELRAY BEACH FL 33444-1728



3. Date Incorporated or Qualified

11/14/1994

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 1825 NW Tenth St.

Suite, Apt. #, etc.

22

City & State

23 Delray Beach, FL

Zip

24 33445

Country

25

2a. Mailing Address

26 1825 NW Tenth St.

Suite, Apt. #, etc.

27

City & State

28 Delray Beach, FL

Zip

29 33445

Country

30

4. FEI Number

65-0530886

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

g. Name and Address of Current Registered Agent

BELTS, RICHARD C
802 LAKE SHORE DR
DELRAY BEACH FL 33444

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1825 NW Tenth St.

83

84 City

Delray Beach

FL

85 Zip Code

33445

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D
STREET ADDRESS BELITS, RICHARD C
CITY-ST-ZIP 802 LAKE SHORE DR
DELRAY BEACH FL 33444

TITLE ☐ DELETE
NAME D
STREET ADDRESS BELITS, ELLAINE C
CITY-ST-ZIP 802 LAKE SHORE DR
DELRAY BEACH FL 33444

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1825 NW Tenth St.
1.4 CITY-ST-ZIP Delray Beach, FL 33445

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 1825 NW Tenth St.
2.4 CITY-ST-ZIP Delray Beach, FL 33445

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Richard Belits
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/28/97

CR2E034 (9/96)