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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000031809 (3)

ELITE PAGE, INC.

Principal	Place	of B	lusiness

Mailing Address

THE BATH STORET MODILI

## **FILED** Apr 28 1997 8:00am Secretary of State



ST. PETERSBUR		ST. PETERSBU	IRG FL 33713-65	37					
						3. Date Incorporated or Qualified 04/24/1995	3a. Date of Las		
2. Principal Pl	ace of Business	Business 2a. Mailing Address		4. FEI Number		Applied For			
21		26			<b>59-3310200</b> Not Applic		Not Applicable		
Sulte, Apt. #, etc.		<u></u> ⊢ '	Suite, Apt. #, etc.		5. Certificate of Status Desired				
City & State		27 City 8 Sto	7 City & State						
23	y & State 28		ıc			6. Election Campaign Financing \$5.00 May  Trust Fund Contribution Added to Fe			
Zip	Country	Zip		Country	,	8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30	]		Florida Statutes 🔀 Yes 🗌 No			
	9. Name and Address of Cu		nt			10. Name and Address of New Reg	istered Agent		
	PORATION INFORMATION S	ERVICES INC.		81	Name				
1201 HAYS STREET			82	82 Street Address (P.O. Box Number is Not Acceptable)					
TALL	AHASSEE FL 32301			83					
				84	City		FL 85 Z	p Code	
11. Pursuant	to the provisions of Sections 607	0502 and 607.1508, FI	orida Statutes,	the above	L	corporation submits this statement for the pi	urpose of changing	g its registered	
office or r	egistered agent, or both, in the S m familiar with, and accept the o	tate of Florida. Such ch	range was auth	orized by	/ the corpo	oration's board of directors. I hereby accep	t the appointment	as registered	
SIGNATURE			,						
	Signature, typed or printed name of registere		(NO1E Re		rrt signature r	equired when reinstating)	DATE		
12.		AND DIRECTORS	DELE 1E	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT		
TITLE	PST LEONARD, STACEY	لسيا	DELETE	1.2 NAME				c Li Addicion	
NAME STREET ADDRESS	771 34TH STREET, NORTH			1.3 STREET	POJECTOR				
CITY-ST-ZIP	ST. PETERSBURG FL 3371			1.4 CITY - S					
TITLE	OTT CILILODONA TE VOT		DELETE	2.1 TITLE	, 1		Chang	e Addition	
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREET	ADDRESS				
CITY-ST-ZIP			,	2. 4 CITY - 1	\$1 - ZIP				
TITLE		L	DELETE	3.1 TITLE	1		☐ Chang	e	
NAME				3.2 NAME	1			ĺ	
STREET ADDRESS				3.3 STREET					
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NAME		<b>L</b>	OLCCIE	4.7 THEC				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY- S					
TITLE		<u></u>	DELETE	5.1 TITLE			☐ Chang	e Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		5.4 CITY - S	T-ZIP				
TITLE			DELETE	6.1 111LE	1		L Chang	e 📙 Addition	
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET	j				
CITY-ST-ZIP				6.4 CITY-S	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.