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Feb 27 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 # P95000064362 (3)

1. Corporation Name:
ELITE INFORMATION AND INVESTIGATIONS, INC.



Principal Place of Business

2230 W BAY DRIVE
SUITE D
LARGO FL 34640
US

Mailing Address

1801 17 W BAY DRIVE
SUITE 210
LARGO FL 33770-1519
US

3. Date Incorporated or Qualified
08/21/1995

3a. Date of Last Report
08/02/1996

2. Principal Place of Business

21 2045 E. BAY DRIVE
Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 APT. 406

27 City & State

23 LARGO, FLORIDA

28 City & State

24 33771 25 US

29 30

4. FEI Number

59-3332677

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

9. Name and Address of Current Registered Agent

VISERTA, THOMAS JR.
1801 17 W BAY DRIVE
SUITE 210
LARGO FL 34640

10. Name and Address of New Registered Agent

81 Name

THOMAS VISERTA JR

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

2045 EAST BAY DRIVE # 406

83

84 City

LARGO

FL

85 Zip Code

33771

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

Thomas Viserta Jr
Signature (Typed or printed name of registered agent and title if applicable)

THOMAS VISERTA JR
(NOTE: Registered Agent signature required when reinstating)

2/19/97
DATE

12. OFFICERS AND DIRECTORS

TITLE 0 ☐ DELETE
NAME VISERTA, THOMAS JR.
STREET ADDRESS 1838 STANTON AVE.
CITY-ST-ZIP LARGO FL 34640

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT / T ☒ Change ☐ Addition
1.2 NAME THOMAS VISERTA JR
1.3 STREET ADDRESS 2045 EAST BAY DRIVE # 406
1.4 CITY-ST-ZIP LARGO, FLORIDA 33771

2.1 TITLE VIS ☐ Change ☒ Addition
2.2 NAME JAN E. BOGGS
2.3 STREET ADDRESS 2045 EAST BAY DRIVE # 406
2.4 CITY-ST-ZIP LARGO, FLORIDA 33771

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:

Thomas Viserta Jr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS VISERTA JR 2/19/97

(813) 448-1804
Daytime Phone #

CR2E034 (9/96)