

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

FILED

Mar 13 1997 8:00am
Secretary of State



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

PROFIT CORPORATION
ANNUAL REPORT
1997

DOCUMENT # P96000034679 (6)

1. Corporation Name
ELRAC PEACHTREE, INC.



Principal Place of Business
466 STONEMONT DRIVE
FORT LAUDERDALE FL 33326

Mailing Address
466 STONEMONT DRIVE
FORT LAUDERDALE FL 33326-3500

3. Date Incorporated or Qualified: 04/22/1996
3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number: 65-0660608
Applied For: Not Applicable

21. SAME

26. SAME

5. Certificate of Status Desired: \$8.75 Additional Fee Required

22. State, Apt. #, etc.

27. Suite, Apt. #, etc.

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

23. Weston

28. Weston

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

24. Zip: 33326

29. Zip: 33326

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEISS, ANDY
466 STONEMONT DRIVE
FORT LAUDERDALE FL 33326

81 Name: ANDREW R WEISS
82 Street Address (P.O. Box Number is Not Acceptable): 466 STONEMONT DR
83
84 City: WESTON FL 85 Zip Code: 33326

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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: *Andrew R Weiss* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
FILE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WEISS, RONNIE E	1.2 NAME	ANDREW R WEISS
STREET ADDRESS	466 STONEMONT DRIVE	1.3 STREET ADDRESS	466 STONEMONT DR
CITY-STATE-ZIP	FORT LAUDERDALE FL 33326	1.4 CITY-ST-ZIP	WESTON FL 33326
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-STATE-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-ST-ZIP	

14. I, the undersigned, 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: *Andrew R Weiss* DATE: 3/10/97 DAYTIME PHONE #: 3063797500

CR2E034 (9/96)