

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90062 012 ***150.00

DOCUMENT # P96000067967

1. Corporation Name

ELDERADO RAVENSWOOD LIMITED, INC.

Principal Place of Business

5201 RAVENSWOOD RD., #103
FORT LAUDERDALE FL 33312

Mailing Address

5201 RAVENSWOOD RD., #103
FORT LAUDERDALE FL 33312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/15/1996

4. FEI Number

65-0693315

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 owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 2340 Griffin Road

Suite, Apt. #, etc.

22

City & State

23 Dania Bch., FL

Zip

24 33312

Country

25 USA

2a. Mailing Address

26 2340 Griffin Road

Suite, Apt. #, etc.

27

City & State

28 Dania Bch., FL

Zip

29 33312

Country

30 USA

9. Name and Address of Current Registered Agent

SMITH, DEBORAH J
5201 RAVENSWOOD ROAD
SUITE 103
FORT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

81 Name

82 Deborah J. Smith

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

2340 Griffin Road

84

City

Dania Bch.

FL

85 Zip Code

33312

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

Deborah J. Smith Deborah J. Smith

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5/1/99

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P
SMITH, DEBORAH J
5201 RAVENSWOOD RD, #103
FORT LAUDERDALE FL 33312

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V
SMITH, SAMANTHA W
5201 RAVENSWOOD RD, #103
FORT LAUDERDALE FL 33312

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

S/T
SMITH, RICHARD N
5201 RAVENSWOOD RD, #103
FORT LAUDERDALE FL 33312

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

President
Deborah J. Smith
2340 Griffin Rd.
Dania Bch., FL 33312

☒ Change ☐ Addition

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

Vice-President
Samantha W. Smith
2340 Griffin Rd.
Dania Bch., FL 33312

☒ Change ☐ Addition

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

Secretary/Treasurer
Richard N. Smith
2340 Griffin Rd.
Dania Bch., FL 33312

☒ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

14. I 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, with all other like empowered.

SIGNATURE:

Deborah J. Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/99

Date

(954) 962-5321

Daytime Phone #

CR2E034 (11/98)