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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000082042 (8)

FILED Apr 28 1997 8:00am Secretary of State

1. Corporation Name ELITE COACH, INC. Principal Place of Business Mailing Address 3855 N. US HWY. 1 COCOA FL 32827 COCOA FL 32827 COCOA FL 32828-5980							
aucoa fl 32	192 <i>1</i>	COCOA FL 32929-3850		Date Incorporated or Qualified	3a. Date	of Last R	report
				10/04/1996	N		
2. Principal (Place of Business	2a. Mailing Address		4. FEI Number		ĮĄ.	oplied For
1		26 P.O. B	117	59-34057	<u>04</u>		ot Applicable
Suite, Apt	t #, etc.	Suite, Apt. #, etc.		6. Certificate of Status Desired		,	Additional equired
City & Sta	16	City & State		6 Floring Open and a Floring			
3	110	28 5HAR PR	S FL	6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Country	8. This corporation has liability fo			
4	25	29 32959	30 USA		☐ Yes 🗹		. , , , , , , , , , , , , , , , , , , ,
	g, Name and Address of C	urrent Registered Agent		10. Name and Address of New R	legistered Ag	ent	
	NRAD, TODO		81 Name				
3855 N. US HWY. 1			82 Street Add	ess (P.O. Box Number is Not Acceptable)			
CO	COA FL 32927		\ <u>-</u>				
			63				
			84 City		6-1	85 Zip	Code
44 11 11 11	t to the over inings of Continue CO	7 05 02 and 607 1500 Florida Ciri	utas the above bened on	reaction authority this statement for the	FL	L.	th registered
office or	recustured agent, or both an the	State of Florida, Such change was	sauthorized by the cornors	rporation submits this statement for the ation's board of directors. I hereby acc	ept the appoir	ntment as	registered
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14. To hereby certify that the information supplied with this filling 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CONRAD O

456-8635

0102412