


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

**FILED**  
**Apr 15, 1999 8:00 am**  
**Secretary of State**

04-15-1999 90074 045 \*\*\*150.00

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<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000024416**

1. Corporation Name  
**EL-AN MARKETING CORPORATION**



Principal Place of Business 127 YACHT CLUB WAY APT. 207 HYPOLOXO FL 33462	Mailing Address 127 YACHT CLUB WAY APT. 207 HYPOLOXO FL 33462
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>7156 Whitfield Ave</b>		2a. Mailing Address 26 <b>7156 Whitfield Ave</b>		3. Date Incorporated or Qualified <b>03/18/1997</b>	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number <b>65-0737408</b>	
City & State 23 <b>Boynton Beach FL</b>		City & State 28 <b>Boynton Beach FL</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip 24 <b>33437</b>		Country 25 <b>USA</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Country 29 <b>USA</b>		Zip 30 <b>33437</b>		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**KATCHER, JERRY**  
 127 YACHT CLUB WAY  
 APT. 207  
 HYPOLOXO FL 33462

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	<b>7156 Whitfield Ave</b>
83	
84 City	<b>Boynton Beach FL</b>
85 Zip Code	<b>33437</b>

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  **3/1/99**  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KATCHER, JERRY</b>	1.2 NAME	
STREET ADDRESS	<b>127 YACHT CLUB WAY, APT. 207</b>	1.3 STREET ADDRESS	<b>7156 Whitfield Ave</b>
CITY-ST-ZIP	<b>HYPOLOXO FL 33462</b>	1.4 CITY-ST-ZIP	<b>Boynton Beach FL 33437</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KATCHER, ZENITA</b>	2.2 NAME	
STREET ADDRESS	<b>127 YACHT CLUB WAY, APT. 207</b>	2.3 STREET ADDRESS	<b>7156 Whitfield Ave</b>
CITY-ST-ZIP	<b>HYPOLOXO FL 33462</b>	2.4 CITY-ST-ZIP	<b>Boynton Beach FL 33437</b>
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-ST-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-ST-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-ST-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-ST-ZIP		6.4 CITY-ST-ZIP	

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:  **3/1/99**  
 Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)