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

**FILED** Mar 20 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000066301 (7) ELSOP CORP. Principal Place of Business Mailing Address 11836 FOUNTAINSIDE CIRCLE 11836 FOUNTAINSIDE CIRCLE **BOYNTON BEACH FL 33437 BOYNTON BEACH FL 33437** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/31/1997 2. Principal Place of Business 2a. Mailing Address Applied For 1412 N Congress 07 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional BEACH 5. Certificate of Status Desired Boynton 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip 33446 Country Country This corporation owes or has paid the current year Intangible Pasin Beach 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LAW OFFICE OF LES SCHNEIDERMAN, P.A. 5301 NORTH FEDERAL HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 200 63 **BOCA RATON FL 33437** 84 City Zip Code 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETÉ 1.1 TITLE Change GERTRUBE DIAMOND NAME 1.2 NAME 11836 FOUNTAINSIDE CIRCLE STREET ADDRESS 1.3 STREET ADDRESS FL 33437 CITY-ST-ZIP 1.4 CITY - ST - ZIP BOYNTON DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS **3.3 STREET ADDRESS** CITY - ST - ZIP 3.4. CITY - ST- ZIP ☐ DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition

> 6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. Thereby 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 trusted 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

3-13-98 \_ 5617310053