

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000012648

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: ELITE REPORTING OF SOUTH FLORIDA, INC.

## Current Principal Place of Business:

707 SOUTHEAST 3RD AVENUE  
SUITE 101  
FORT LAUDERDALE, FL 33316

## New Principal Place of Business:

## Current Mailing Address:

707 SOUTHEAST 3RD AVENUE  
SUITE 101  
FORT LAUDERDALE, FL 33316

## New Mailing Address:

FEI Number: 65-0818204      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOVIERO, DAWN  
707 SE 3RD AVENUE  
SIXTH FLOOR  
FORT LAUDERDALE, FL 33316 US

## Name and Address of New Registered Agent:

SOVIERO, DAWN  
707 SE 3RD AVENUE  
SUITE 101  
FORT LAUDERDALE, FL 33316 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAWN SOVIERO

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ARLOTTA, CAROL  
Address: 721 NORTHWEST 107TH AVENUE  
City-St-Zip: PLANTATION, FL 33324

Title: VD ( ) Delete  
Name: SOVIERO, DAWN  
Address: 7421 SOUTHWEST 13TH STREET  
City-St-Zip: PLANTATION, FL 33317

Title: S ( ) Delete  
Name: VIVERETTE, LINDA S  
Address: 7924 NW 83 ST  
City-St-Zip: TAMARAC, FL 33321

Title: TD ( ) Delete  
Name: VIVERETTE, LINDA S  
Address: 7924 NW 83 ST  
City-St-Zip: TAMARAC, FL 33321

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL ARLOTTA

PD

04/25/2008

Electronic Signature of Signing Officer or Director

Date