

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000012648

FILED
Apr 09, 2009
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
SUITE 101
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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:

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

04/09/2009

Electronic Signature of Signing Officer or Director

Date