



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000036926					
1. Entity Name ELLER DRIVE PROPERTIES, INC.					
Principal Place of Business 8033 NW 36TH STREET MIAMI, FL 33166	Mailing Address 8033 NW 36TH STREET MIAMI, FL 33166				
DO NOT WRITE IN THIS SPACE		 02222006 No Chg-P CR2E034 (11/05)			
		4. FEI Number 65-0838476	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Applied For</td> </tr> <tr> <td style="padding: 2px;">Not Applicable</td> </tr> </table>	Applied For	Not Applicable
Applied For					
Not Applicable					
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ISICOFF, ERIC D ESQ. 1101 BRICKELL AVENUE SUITE 800-SOUTH MIAMI, FL 33131		DO NOT WRITE IN THIS SPACE			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
		1100000450045 03/03/06-80078-009 150.00			
10. OFFICERS AND DIRECTORS					
TITLE D	NAME RIBADENEIRA, DIEGO	DO NOT WRITE IN THIS SPACE			
STREET ADDRESS 8033 NW 36TH STREET	CITY-STATE-ZIP MIAMI, FL 33166				
TITLE D	NAME RIBADENEIRA, HELENA				
STREET ADDRESS 8033 NW 36TH STREET	CITY-STATE-ZIP MIAMI, FL 33166				
TITLE D	NAME BALAREZO, DANIELLA				
STREET ADDRESS 8033 NW 36TH STREET	CITY-STATE-ZIP MIAMI, FL 33166				
TITLE S	NAME MENENDEZ, GEORGINA				
STREET ADDRESS 8033 NW 36TH STREET #440	CITY-STATE-ZIP MIAMI, FL 33166				
TITLE NAME	STREET ADDRESS CITY-STATE-ZIP				
TITLE NAME	STREET ADDRESS CITY-STATE-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____		2/22/06 305-597-9044			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>			