2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 18, 2005 8:00 am Secretary of State DOCUMENT # P99000047170 1. Entity Name 04-18-2005 90279 008 ***150.00 ELA INVESTMENTS INC. Principal Place of Business Mailing Address 1420 BAY SHORE DUNEDIN FL 34698 1420 BAY SHORE DUNEDIN FL 34698 2. Principal Place of Business 3. Mailing Address Po Box Suite, Apt. #, etc. 1144 1114 FLORIDA AVE Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) SUITE City & State City & State 4. FEI Number Applied For PALM HARBOR FL 59-3577489 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BROWPER TR DAVID MIHAILA, IOAN VIOREL 1420 BAY SHORE Street Address (P.O. Box Number is Not Acceptable). **DUNEDIN FL 34698** City Clearwater 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 DAVID BROWDER FR SIGNATURE (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DVP TITLE ☐ Delete TITLE ☐ Change Addition MIHAILLA, IOAN V NAME NAME STREET ADDRESS 2421 BUTTERNUT CT STREET ADDRESS CITY-ST-ZIP **DUNEDIN FL 34698** CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NEMET, AUGUSTIN C NAME STREET ADDRESS 2421 BUTTERNUT CT STREET ADDRESS CITY-ST-ZIP **DUNEDIN FL 34698** CITY-ST-ZIP ☐ Change ☐ Delete Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete ☐ Change Addition MAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 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.

FILED

AUGUSTIN NEMET SIGNATURE: