2001 UNIFORM BUSINESS REPORT (UBR)  DOCUMENT # P99000051336						FILED Mar 09, 2001 8:00 am Secretary of State					
1. Entity Name ELISE, INC.	·				,		001 90274				
Principal Place of Business 215 TARPON INDUSTRIAL CIPCLE TARPON SPRINGS FL 34688		Mailing Address 215 TARPON INDUSTRIAL CIRCLE TARPON SPRINGS FL 34588					297	187		+	
The Old Schilledo I C S		THE OF GRANGOTE STOR	•		1 1 <b>6 7</b> 1 1 6 <b>6</b> 1 1 1 <b>8</b> 1	(4)(1) (1)(1) (4)(1) (4)	, , , , , , , , , , , , , , , , , , ,	)	771 <b>9 (</b> 771) 7 <b>8(</b> )	7	
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRI	ITE IN THIS SP	ACE		_*	
City & State		City & State			El Number	APPLIED_	EOF X		oplied For ot Applicable	ري.	
Zip	Country	ζip	Country			Status Desired		8.75 Add	litional d'	]	
6. Name and Address of Current Registered Agent Name					2 2	dress of New	Registered Ac	ent		00	
SHORT, BETSY 215 TARPON INDUSTRIAL CIRCLE TARPON SPRINGS FL 34688			215	SS (P.O. B	bx Number is	Not Acceptable	*tR19.	LC	rde	1322	
			City 10,	Rpon	, JAK	inss_	FL	ZpCode	<u>. 82.</u>		
SIGNATURE Signature, to	entity submits this statement for eyeve Rud	4_ K	registered office or regi	1	Pires,	0 1	lorida.	100	<u>                                     </u>		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		After MAY 1, 20 Make Check Payab	II FEE IS \$150.00 DI Fee will be \$550.0 le to Department of	State	Trust F	n Campaign Fi und Contribution	on. 🗆 🗔	Ådded	O May Be to Fees		
TITLE	Resident	Delete	12.	ADI	DITIONS/CH	ANGES TO OF		Change	3 IN 11 Addition	8	
NAME MEYER STREET ADDRESS 215 TA	R, RUDY ARPAN INDUSTRIAL CIRCLE ON SPRINGS, FL 34688	<u>.</u>	NAME STREET ADDRESS CITY-ST-ZIP	-				-		E034 (10/00	
TITLE A	secretairy	☐ Delete	TITLE NAME	•			<u> </u>	] Change	Addition	- N	
	ARPON INDUSTRIAL CIRCLI ON SPRINGS FL 34688		STREET ADDRESS CITY-ST-ZIP	•						_	
TITLE NAME		Delete	TITLE NAME		-	<u></u>	] <del></del>	Change	Addition		
STREET ADDRESS CITY-ST-ZIP	1		SIREET ADDRESS . CITY-SI-ZIP						D same	-	
TITLE NAME STREET ADORESS CHY-ST-ZIP		☐ Deleta	TITLE NAME STREET ADDRESS CITY-ST-ZIP				l	Change .	☐ Additlon		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,			Change	Addition		
indicated on this re of the corporation of	the information supplied with the port or supplemental report is to or the receiver or trustee empowers attachment with an address twith the supplemental with the supple	rue and accurate and that m vered to execute this report a	y signature shall have the sequired by Chapter	he same le	igal effect as	if made under	oath; that I am ne appears in E	an officer of	or director		