FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED PROFIT FLORIDA DEPARTMENT OF STATE Mar 06 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # (5)S03882 **ELISA CORP. III** Principal Place of Business Mailing Address 2324 NW 7 CT 2324 NW 7 CT MIAMI FL 33127-4208 MIAMI FL 33127-4208 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 10/04/1990 2. Principal Place of Business 2a, Mailing Address Applied For 65-0227804 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, elc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 26 Added to Fees Country Zip Country 8. This corporation owes or has paid the current year intangible 24 25 30 Personal Property Tax due June 30. Yes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name CASTANEDA, ROLANDO 2324 NW 7 CT Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33127** 83 City 64 Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Fam familiar with land accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of regestered agent and title, tappor able OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TOTLE 1.1 TITLE ☐ Change Addition NAME CASTANEDA, ROLANDO 1.2 NAME STREET ADDRESS 2324 NW 7 CT 1.3 STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition 2 1 TITLE Change TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - \$1 - ZIP CITY-ST-ZIP Change Addition 🔲 DELETE TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS

14. Thereby 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 annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.4 CITY - ST - ZIP

64 CITY-ST-ZIP

6 1 TITLE

62 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE: X

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

301) 633-5355

☐ Change

Addition