


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

APPROVED  
AND  
FILED

pg. 1 of 2

97 AUG 18 PM 2:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # <b>SD4008</b> 1. Corporation Name <b>ELIER CONSTRUCTION INC</b>
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Principal Place of Business <b>6110 NW 7th St MARGATE, FL 33063</b>	Mailing Address
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2. Principal Place of Business 21 <b>6110 NW 7th St</b>	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 <b>Margate FL</b>	City & State 28
Zip 24 <b>33063</b>	Country 25
Country 29	Zip 30

3. Date Incorporated or Qualified <b>10-1-90</b>	3a. Date of Last Report <b>3/96</b>
4. FEI Number <b>59035702</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>Steren Elier 6110 NW 7th St Margate, FL 33063</b>	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	<b>100002272141--8</b>
83	<b>-08720797--01054--006</b>
84 City	<b>****165.00 ****165.00</b>
85 Zip Code	<b>FL</b>

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>President / Secretary</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Diane Elier</b>	1.2 NAME	
STREET ADDRESS	<b>6110 NW 7th St</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>Margate, FL 33063</b>	1.4 CITY-ST-ZIP	
TITLE	<b>Vice President / Treasurer</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Steren Elier</b>	2.2 NAME	
STREET ADDRESS	<b>6110 NW 7th St</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>Margate FL 33063</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplementary 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 trustee 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.

SIGNATURE: **Alan G. S.** 4-26-97 934-972-5302  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

pg.

**ELLER CONSTRUCTION, INC.,  
6110 N.W. 7TH STREET  
MARGATE, FL 33063  
(954) 972-5302**

July 14, 1997

Division of Corporations  
Attention: Debbie  
Annual Reports Filings  
Post Office Box 1500  
Tallahassee, FL 32302-1500

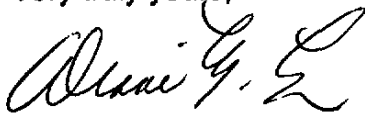
Re: **Eller Construction Inc.,**

Dear Debbie:

This is to follow up in the above referenced matter. As I informed you today, I did not receive the return of my annual corporate report that your office mailed to me. Somehow it must have gotten lost in the mail. Since I never received your correspondence and pursuant to your instructions, enclosed is a copy of the report I originally filed with your office along with a check for the \$165.00 for the annual fee.

Thank you for your cooperation. If you have any questions or comments, please contact me.

Very truly yours,



Diane M. Eller  
President  
Enclosure