

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 26, 2001 08:00 AM**
Secretary of State**DOCUMENT # S27026**1. Entity Name
ELYSIUN, INC.**Principal Place of Business**1461 SW AVE
#19
POMPANO BEACH FL
33069**Mailing Address**632 NW 29TH ST
WILTON MANORS FL
33311**2. Principal Place of Business**

1461 SW 30 AVE

3. Mailing AddressSuite, Apt. #, etc.
#18

Suite, Apt. #, etc.

City & State
POMPANO BEACH FL

City & State

Zip Country
33069

Zip Country

4. FEI Number
65-0238885Applied For
Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentSTADNIK ALEXANDER
632 NW 29TH ST.WILTON MANORS FL
33311 US**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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.

SIGNATURE _____ **04/26/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE D ☐ Delete
NAME FOTI STEPHEN VJR
STREET ADDRESS 632 NW 29TH ST.
CITY-ST-ZIP WILTON MANOR FL 33311TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE VPD ☐ Delete
NAME JANNAN JORILYNN
STREET ADDRESS 1685 LINTON LKS DR
CITY-ST-ZIP DELRAY BEACH FL 33445TITLE VPD ☒ Change ☐ Addition
NAME ESKEW PHILLIP
STREET ADDRESS 1461 SW 30TH AVE #18
CITY-ST-ZIP POMPANO BEACH FL 33069TITLE D ☐ Delete
NAME ESKEW MICHAEL
STREET ADDRESS 632 NW 29TH ST.
CITY-ST-ZIP WILTON MANOR FL 33311TITLE VP D ☒ Change ☐ Addition
NAME ESKEW MICHAEL
STREET ADDRESS 1461 SW 30TH AVE #18
CITY-ST-ZIP POMPANO BEACH FL 33069TITLE STD ☐ Delete
NAME STADNIK ALEXANDER
STREET ADDRESS 632 NW 29TH ST.
CITY-ST-ZIP WILTON MANOR FL 33311TITLE VPTD ☒ Change ☐ Addition
NAME STADNIK ALEXANDER
STREET ADDRESS 632 NW 29TH ST.
CITY-ST-ZIP WILTON MANOR FL 33311TITLE PD ☐ Delete
NAME STADNIK RUTHANNE M
STREET ADDRESS 632 NW 29TH ST.
CITY-ST-ZIP WILTON MANOR FL 33311TITLE PSD ☒ Change ☐ Addition
NAME STADNIK RUTHANNE M
STREET ADDRESS 632 NW 29TH ST.
CITY-ST-ZIP WILTON MANOR FL 33311TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUTHANNE STADNIK, PRES.

P

04/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)