2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # S56278

1. Entity Name

ELDÉN ENTERPRISES, INC.



Principal Place of Business

ELDEN ENTERPRISES, INC.

35 OCEAN REEF DRIVE, #138 KEY LARGO, FL 33037 US Mailing Address

ELDEN ENTERPRISES, INC. 35 OCEAN REEF DRIVE, #138 KEY LARGO, FL 33037 US

FILED May 01, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03282007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0271515

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLOCK, ANNEMARIE HARRIS 7700 N. KENDALL DRIVE SUITE 506 MIAMI, FL 33156

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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.						
SIGNATURE						
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstaling) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.				
10.	OFFICERS AND DIREC	TORS				
TITLE	DP					
NAME	ELDEN, PHYLLIS A MS.		1			
STREET ADDRESS	35 OCEAN REEF DRIVE, #138		1			
CITY-ST-ZIP	KEY LARGO, FL 330374337					
TITLE						
NAME						
STREET ADDRESS					U00000753104	
CITY-ST-ZIP					- 05/22/07-80006-017 (150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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.

SIGNATURE:

TITLE NAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS

CITY-ST-ZIP