



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # S67870	
1. Entity Name ELYSEE INVESTMENT OF SURFSIDE, INC.	

Principal Place of Business 6950 COLLINS AVE MIAMI BCH, FL 33140 US	Mailing Address 210-71 STREET #309 MIAMI BEACH, FL 33141 US
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DO NOT WRITE IN THIS SPACE



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 11-3123934	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

YEHEZKEL, HAIM
 317-71 STREET
 MIAMI BEACH, FL 33141

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000798239
 01/30/08-80020-024 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	YEHEZKEL, HAIM
STREET ADDRESS	210-71 ST #309
CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE	V
NAME	MUSSAFFI, ROY
STREET ADDRESS	210-71 STREET #309
CITY-ST-ZIP	MIAMI, FL 33141
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Haimi Elysee **01-22-08** **305-8648885**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #