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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

ELAN U.S.A., INC.

FILED Mar 30 1998 8:00am Secretary of State

- I INDAK BUNDOK FIRMO 1931K NDINI KANDI KINI NINI NINI NINI ALDIK BUDIK BINIK RINIK RIPEK FANK

Principal Place of Business Mailing Address			· · · · · · · · · · · · · · · · · · ·		in mindt ginst nintt ninte glatt in di
4100 N 28TH TERR 4100 N		4100 N 28TH TERR			
HOLLYWOOD FL 33021		HOLLYWOOD FL 33201		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified	THIS SPACE
				02/05/1992	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-03 13045	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	\$8.75 Additional
22		27		b. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	1 2	Trust Fund Contribution	
Zip 🌂	Country 25	Zip	Country	8. This corporation owes or has paid th	
24 3		29 3300-	30	Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
9. Name and Address of Current Registered Agent ELIYAUH, LEVY 81 Name					
1200 STIRLING R SUITE 8-B			62 Street At	ddress (P.O. Box Nirrobay is Net Accaptable)	LE
DANIA FL 33004 63				30 14 00	
, or	WANTE GOOD				
			84 City	DUWWOOD	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508. Florida Statul	es, the above-named c	orporation submits this statement for the purpo	ose of changing its registered
office or i	registered agent, or both, in the S	ate of Florida. Such change was	authorized by the corpo	oration's board of directors. I hereby accept the	e appointment as registered
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered	agent and tille if applicable. (NOT	E: Registered Agent signature re	equired when reinstating) D	DATE
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	DELETE	1.1 TITLE	< E	Change Addition
NAME	SAVIR, ELAN		1.2 NAME	Jane, com	earce
STREET ADDRESS	1200 STIRLING RD.		1.3 STREET ADDRESS	4100 M CB. 16	TO TOX
CITY-ST-ZIP	DANIA FL		1.4 CITY-ST-ZIP	HOLLY WOND TO	- 33080
TITLE		☐ DELETE	2.1 TITLE	•	Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		•
CITY-ST-ZIP		- I protett	2.4 CITY-ST-ZIP		Change C Addition
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
TITLE		L. VILLE	4.1 IIILE 4.2 NAME		The origing of The original
NAME OTREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS			4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	5.1 TRLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
***************************************			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		<u>-</u> ·
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CiTY-ST-ZIP		
14. I hereby	certify that the information supplie	d with this filing does not qualify f	or the exemption stated	in Section 119.07(3)(i), Florida Statutes. I furth	ner 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 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.					