SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

Aug 07 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT #
1. Corporation Name V50752 ELITE COMMUNICATIONS, INC. Mailing Address Principal Place of Business 2801 STATE ROAD 60 EAST 2801 STATE ROAD 60 EAST VALRICO FL 33594 VALRICO FL 33594 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report <u>07/13/1992</u> <u>05/01/1996</u> 2. Principal Place of Business 2a. Mailing Address Applied For 59-3151187 Not Applicable 26 \$8.75 Additional Sulte, Apt. #, etc. Suite, Apt #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 23 28 Zip Zip Country 8. This corporation owes or has paid the current year Intangible Country Yes Personal Property Tax due June 30 **3**0 24 29 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MCCORD, KELLI 2801 STATE ROAD 60 EAST 82 VALRICO FL 33594 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this shapeent 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 heard of directors livereby accept the appointment as registered agent. I am familiar viril, and accept the obligations of Section 67.0505, Florida Statutes.

SIGNATURE

SIGNATURE O OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE Change 1.1 TITLE TITLE MCCORD, KELLI NAME 1.2 NAME 2801 STATE ROAD 60 EAST 1.3 STREET ADDRESS STREET ADDRESS valrico fl 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETÉ ___ Change 2.1 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STEET ADDRESS - ST - ZIP CITY-ST-ZIP 44 C Change Addition DELETE 5.1 TI TITLE 5.2 N NAME 5.3 \$ ET ADDRESS STREET ADDRESS 5.40 - ST - ZiP CITY-ST-ZIP Change ___ Addition DELETE 6.1 T TITLE 6.2 NAME 6.3.5 ET ADDRESS STREET ADDRESS -ST-ZIP CITY-ST-ZIP emption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the curate and that my signature shall have the same legal effect as if made under oath; that cute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby certify that the information supplied with this filling does not qualify for the information indicated on this annual report or supplemental annual report is true and I am an officer or director of the corporation or the receiver or trustee empowered to changed, or on an allachment y appears in Block 12 or Block 1 th an address.

FILED