Name and Address of Current Registered Agent:			
CASTILLO B., ALVARO 1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131 US			
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:			
Electronic Signature of Registered Age	ent		Date
Officer/Director Detail :			
D	Title	PD	
ALSALEH, MAJDI	Name	ALSALEH, MAJDI	
1390 BRICKELL AVENUE SUITE 200	Address	1390 BRICKELL AVE STE 200	
p: MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	
S			
CASTILLO, ALVARO			
1390 BRICKELL AVE STE 200			
	ALVARO ELL AVENUE SUITE 200 3131 US med entity submits this statement for the purpose of RE: Electronic Signature of Registered Age rector Detail : D ALSALEH, MAJDI 1390 BRICKELL AVENUE SUITE 200 D: MIAMI FL 33131 S CASTILLO, ALVARO	ALVARO ELL AVENUE SUITE 200 3131 US med entity submits this statement for the purpose of changing its registered office or registered RE: Electronic Signature of Registered Agent rector Detail : D Title ALSALEH, MAJDI Name 1390 BRICKELL AVENUE SUITE 200 Address p: MIAMI FL 33131 City-State-Zip: S CASTILLO, ALVARO	ALVARO ELL AVENUE SUITE 200 3131 US med entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida RE: Electronic Signature of Registered Agent rector Detail : D Title PD ALSALEH, MAJDI Name ALSALEH, MAJDI 1390 BRICKELL AVENUE SUITE 200 Address 1390 BRICKELL AVE STE 200 b: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131 S CASTILLO, ALVARO

DOCUMENT# P0000086433

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: ESNAD CORPORATION

Current Principal Place of Business:

1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131

Current Mailing Address:

1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131

FEI Number: 65-1038086

Name and Address of Current Registered Agent:

City-State-Zip: MIAMI FL 33131

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MAJDI ALSALEH

Electronic Signature of Signing Officer/Director Detail

FILED Feb 26, 2019 Secretary of State 8029562262CC

Certificate of Status Desired: No

D

Date