F0500005392

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SECRETARY OF STATE
SECRETARY FLORID

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COVER LETTER

Division of Corporations
SUBJECT: ES E ELECTRONICS inc. (Name of Corporation)
DOCUMENT NUMBER: FOSOOOOS392
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alina MOGILE SKY (Name of Contact Person) E, E Electronics, inc. (Firm/Company) 17240 S. Tamiami Tr., Unit 9 (Address)
For further information concerning this matter, please call:
(Name of Contact Person) at (139) 454-1445 (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

in order to change its registered of 1. The name of the corporation:	E Elle	_	_	•	ca.		
2. The principal office address: 172		Tam	iani	TR.	Unit	9	
3. The mailing address (if different):	Th	e SA	me				
4. Date of incorporation/qualification:	16-05	Document	number: <u>F</u>	2500	2000	539	2
5. The name and street address of the current Florida Department of State:	LINA NO	nt and registered My //EVL	ed office on fil	e with the	e		
1752 C	% १	del S	ol				
Boea RA	TON	FL	33 43.	<u> </u>	IAT IS	06	
6. The name and street address of the new re (if changed): 1740 S. FOLT M (P.O. Box	THM YEM (NOT acceptable)	ami	7A. V.	ui 9	RETARY OF STATE AHASSEE, FLORIDA	APR 25 PM 12: 10	FILED
The street address of its registered office a as changed will be identical.	and the street ad	ldress of the b	usiness office	of its reg	gistered ag	ent,	
Such change was authorized by resolution authorized by the board, or the corporation	i duly adopted b n has been notif	by its board of lied in writing	directors or b	y an offi e.	cer so		
Signature of an officer or director	<u> </u>	MOGILA	VIKY inted or typed nam	ALING e and title)	pres	ride	=1
I hereby accept the appointment as registe I further agree to comply with the provision of my duties, and I am familiar with and a document is being filed merely to reflect a corporation has been notified in writing o	ered agent and a ons of all statute accept the oblige a change in the i of this change.	agree to act in es relative to t ation of my po registered offi	this capacity he proper and sition as regi ce address, I	, i complet stered as hereby co	e perjorme ent. Or, if onfirm that	ance this the	
Quina Moof (Signature of Registered April)			Y-21-	06			
If signing on behalf of an entity:			(Date)				
Alina Mogilarsky							

* * * FILING FEE: \$35.00 * * *