2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2005 08:00 AM Secretary of State DOCUMENT # J12613 1. Entity Name ESTEFAN ENTERPRISES, INC. Principal Place of Business Mailing Address 420 JEFFERSON AVENUE 420 JEFFERSON AVENUE MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33139 US 04252005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FÉI Number Applied For 59-2738452 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent INTRASTATE REGISTERED AGENT CORPORATION DO NOT WRITE 701 BRICKELL AVĒNUE SUITE 3000 IN THIS SPACE MIAMI, FL 33131 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. Signature, typed or printed name of registered agent and title if applicable /NOTE Begistered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE ESTEFAN, EMILIO JR NAME STREET ADDRESS 420 JEFFERSON AVENUE U000000344923 CITY-ST-ZIP MIAMI BEACH, FL 33139 -04/30/05-30015-003 150.00 TITLE ESTEFAN, GLORIA M NAME STREET ADDRESS 420 JEFFERSON AVENUE CITY-ST-7IP MIAMI BEACH, FL 33139 TITLE AMADEO, FRANK NAME STREET ADDRESS 420 JEFFERSON AVENUE DO NOT WRITE CITY-ST-ZIP MIAMI BEACH, FL 33139 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this lifting does not qualify for the exemption stated in Section 119.07(3)(i), 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:

CITY-ST-ZIP

Frank Amadec

4-25-05

Commence of the Commence of th

(305) 695-7000

FILED

e Daytime