

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35046

FILED  
Jan 09, 2006  
Secretary of State

**Entity Name:** ESTHER NETWORK INTERNATIONAL, INC.

**Current Principal Place of Business:**

854 CONNISTON RD  
WEST PALM BEACH, FL 33405 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ESTHER S. ILNISKY  
2840 FARRAGUT LANE  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

FEI Number: 65-0196524      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ILNISKY, ESTHER S.  
2840 FARRAGUT LANE  
WEST PALM BEACH, FL 33409 US

**Name and Address of New Registered Agent:**

ILNISKY, ESTHER S.  
2840 FARRAGUT LANE  
WEST PALM BEACH, FL 33409 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: ESTHER S. ILNISKY

01/09/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VTD ( ) Delete  
Name: ILNISKY, WILLIAM N.,  
Address: 2840 FARRAGUT LANE  
City-St-Zip: W. PALM BEACH, FL

Title: PD ( ) Delete  
Name: ILNISKY, ESTHER S.,  
Address: 2840 FARRAGUT LANE  
City-St-Zip: W. PALM BEACH, FL

Title: SD ( ) Delete  
Name: GOODWIN, DAISY,  
Address: 11930 HARBOR COVE DR.  
City-St-Zip: JACKSONVILLE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPTD (X) Change ( ) Addition  
Name: ILNISKY, WILLIAM N  
Address: 2840 FARRAGUT LANE  
City-St-Zip: W. PALM BEACH, FL 33409

Title: PD (X) Change ( ) Addition  
Name: ILNISKY, ESTHER S.,  
Address: 2840 FARRAGUT LANE  
City-St-Zip: W. PALM BEACH, FL 33409

Title: SD (X) Change ( ) Addition  
Name: GOODWIN, DAISY  
Address: 11930 HARBOR COVE DR.  
City-St-Zip: JACKSONVILLE, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM ILNISKY

VPTD

01/09/2006

Electronic Signature of Signing Officer or Director

Date