2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2004 8:00 am Secretary of State DOCUMENT # P00000054392 04-26-2004 90983 013 ***158.75 YESHA ENTERPRISES, INC. Principal Place of Business Mailing Address 926 HUNTERS CREEK DR 5045 N W 17 NORTH 94066888 DELELONY SPRINGS, FL 32720 APT #104 DELAND, FL 32720 2. Principal Place of Business 3. Mailing Address Rolling River Rd 1342 Suite, Apt. #. etc. Suite, Apt. #, etc. 04142004 Cha-P CR2E034 (10/03) City & State DECAND Applied For City & State 4. FEI Number FLORIDA 59-3651351 Not Applicable Zio Zip 32720 Country Country USA \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent VIJAYKUMAR- GOPESHWAR-PANDIT VIJAYKUMAR, GOPESHWAR P Street Address (P.O. Box Number is Not Acceptable) 926 HUNTERS CREEK DR., APT. 104 DELAND, FL 32720 City DECAND Zip Code 32720 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. GODESHWHR 4119104 Signature, typed o nted name of registered agent and title if a 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE TX Change ☐ Addition PANDIT TINA NAME PANDIT, TINA NAME 1342 Rolling River ROAD STREET ADDRESS 926 HUNTERS CREEK DR. #104 STREET ADDRESS DELAND, FL 32720 CITY-ST-ZIP CITY-ST-ZIP DELAND FLORIDA 32720 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78 CITY+ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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: TINA PANDIT 4119104

FILED