2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000097056

1. Entity Name

ENTERPRISE GLOBAL SERVICES INC.



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90176 048 ***150.00

Principal Place of Districts TAMARAC FL 33221 2. Principal Place of Business Suite, Apr. F. etc. Svite, A	,		•				GOO WE THE						
Sulfe Apt 8, etc. City & State City & State Country Country Country Country Country Country S. Certificate of Status Desired S. Certificate of Status Name C. As Address of New Registered Agent The Name Second Address of New Registered Agent The Name The Name Second Address of New Registered Agent The Name The Name The Name The Name The Name The Name The	=7102 NW 99Th	H AVE	ستبدئ يهزمن	7102	NW 99TH AVE				1 1 14 /1014 (14 14 /14 16 /14 16 /14 1				
City & State City & State City & State City & State Country Country Country S. Certificate of Struss Desired Residence For Agapted Procession Sa. 75 A Adamond Procession Sa. 75 A Adamond Procession Sa. 75 A Adamond Procession For Agapted Procession Residence For Agapted Procession	Principal Place of Business Address Address							1					
Zip Country Zip Country 5. Certificate of Status Desired Sp. 75. Additional Fee Plaguests E. Neme and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Add	Suite, Apt. #, etc. Suite, Apt. #, etc.							1	☐ CHECK HERE	E IF MAKING	CHANGES		
E. Name and Address of Current Registered Agent CASANOVA, RAFAEL 7102 NW 99TH AVE TAMARAC FL 33321 City FL City City City FL City City City City FL City	City & State	е		City	City & State			4. 1	4. FEI Number 65-1057630				
CASANOVA, RAFAEL 7102 NW 99TH AVE TAMARAC FL 33321 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Second	Zip	Country			Zip Country			5.	Certificate of Status Desired		\$8.75 Add	ditional	
CASANOVA, RAFAEL 7102 NW 99TH AVE TAMARAC FL 33321 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Second		6. Name an	d Address of Curr	ent Register	ed Agent			7. 1	Name and Address of New	Registered	Agent		
T102 NW 99TH AVE TAMARAC FL 33321 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Forida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, types or pretad frame of registered agent. P. Electron Carmatign Financing Spation Added to Faces After May 1, 2003 Fee will be \$550.00 Make Check Physible to Finding Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN II INTE MAKE SIRET ADDRESS CITY-SI-2P TILE MAKE CITY-SI-2P TILE MAKE SIRET ADDRESS CITY-SI-2P TILE MAKE SIRET ADDRESS													
TAMARAC FL 33321 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Supplement Appear signature required when increasings	•				Street Address			(P.O. Box Number is Not Acceptable)					
8. The above named onlity submits this statement for the purpose of changing its registered defice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature Signature													
B. The above named entity submits this statement for the purpose of changing its registered aligner, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature Signa	TAMAHAU		<u> </u>			· 							
The collegations of registered agent. SIGNATURE Signature, treat or greated rative of agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent and title 1 aporticable (MOTE Registered Agent displaced agent agent and title 1 aporticated (MOTE Registered Agent agent a						C	ity			FL	Zip Code	e	
SIGNATURE Surveiume hyperof or persistor name of registened appear and stile if applicable. (NOTE: Registered Appear Egrature required when itemsztangs) DATE													
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10.	SIGNATURE												
After May 1, 2003 Fee will be \$550,00 Make Check Payable to Florida Department of State 10.						·			T:				
TILE NAME SITECT ADDRESS CITY-ST-ZIP TILE NAME NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STR	After May 1, 2003 Fee will be \$550.00 Added to Fees												
TITLE NAME SIRECT ADDRESS CITY-ST-ZIP TITLE V GOMEZ, HORTENSIA 7102 NW 99TH AVE TAMARAC FL 33321 TITLE NAME SIRECT ADDRESS CITY-ST-ZIP Change Addition Addition Addition NAME SIRECT ADDRESS CITY-ST-ZIP TITLE NAME SIRECT AD	<u> </u>				De	11		<u> </u>	DITIONS (CHANGES TO GE	EICEBS AND	DIBECTOR	C INI 11	
NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP		В	OFFICENS F	IND DIRECTO			-	AL.	JUITIONS/CHANGES TO OF	FICENS AIVE			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		•	RAFAFI F		Delete						☐ olialige	☐ Addition	
TAMARAC FL 33321	STREET ADDRESS					STREET AD	DRESS)	
NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE STREET ADDRESS CITY-ST-2IP		9				CITY-ST-Z	ZIP _						
STREET ADDRESS CITY-ST-ZIP TITLE TI	TITLE	٧	-		☐ Delete	TITLE		_			☐ Change	Addition	
TAMARAC FL 33321													
TITLE NAME STREET ADDRESS CITY-ST-ZIP							1					1	
NAME STREET ADDRESS		TAMARAC FL	33321				(IP						
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1				L_l Delete						L Change	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	=						DRESS		1				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1											}	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	TITI F				□ Delete	-					Change	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE OLDelete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE OLDelete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE OLDelete TITLE OLDelete TITLE OLDelete STREET ADDRESS CITY-ST-ZIP OLITY-ST-ZIP OLITY-ST-ZIP OLITY-ST-ZIP OLITY-ST-ZIP OLITY-ST-ZIP					CD Detete		ł				onungo		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS		•			STREET AD	DRESS						
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	CITY-ST-ZIP					CITY-ST-Z	IP .						
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE				☐ Delete	TITLE					☐ Change	Addition	
CITY-ST-ZIP CITY-ST-ZIP TITLE	NAME					NAME							
TITLE							l l						
NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP		L				CITY-ST-Z	IP .						
STREET ADDRESS CITY-SI-ZIP STREET ADDRESS CITY-ST-ZIP			•		Delete						Change	☐ Addition	
CITY-ST-ZIP CITY-ST-ZIP							DDESC			•			
	I						I						
		ertify that the inf	ormation supplied	with this filipa	does not qualify for			action 1	119 07(3Vi) Elarida Statutas	I further and	tifu that the is	formation	

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 recoired 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.