ESAN Corporation 9

FILED
May 29, 2002 8:00 am
Secretary of State

04-22-2002 90113 012 ***158.75

31543

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000060254

1. Entity Name
ENGINEERED SYSTEMS AND NETWORKS CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4821 Coconut Creek Parkway	4821 Coconut Creek Parkway
Suite, Apt. #, etc.: #153	Suite, Apt. #, etc.: #153
City & State: Coconut Creek, Florida	City & State: Coconut Creek, Florida
Zip: 33063 Country: USA	Zip: 33063 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1072782 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ROSS TRAGER, P.A.

Street Address (P.O. Box Number Is Not Acceptable): 1000 North HIATUS ROAD, SUITE 110

City: PEMBROKE PINES FL Zip Code: 33026

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.

SIGNATURE [signature]
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P/T/C/M	TITLE	
NAME	JOHN R. TELLEZ	NAME	
STREET ADDRESS	1784 HAMMOCK BLVD.	STREET ADDRESS	
CITY-ST-ZIP	COCONUT CREEK, FL. 33063	CITY-ST-ZIP	
TITLE	V/S/D	TITLE	
NAME	RYANNE JACKSON	NAME	
STREET ADDRESS	1784 HAMMOCK BLVD.	STREET ADDRESS	
CITY-ST-ZIP	COCONUT CREEK, FL. 33063	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	DO NOT WRITE IN THIS SPACE
CITY-ST-ZIP		CITY-ST-ZIP	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE [signature] JOHN R. TELLEZ 4/10/2002 954-978-2262
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #