2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000078391

Entity Name: ESQUIRE SPECIALTY SERVICES, INC.

FILED Jun 26, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 801 N MAGNOLA AVE STE 204 1232 ROCK SPRINGS ROAD ORLANDO, FL 32803 #101 APOPKA, FL 32712 **Current Mailing Address: New Mailing Address:** 801 N MAGNOLA AVE STE 204 801 N MAGNOLA AVE. ORLANDO, FL 32803 STE. 204 ORLANDO, FL 32803 US FEI Number: 59-3738805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOLER, ANDREW C MOLER, ANDREW C MR. 801 N MAGNOLA AVE STE 204 801 N MAGNOLA AVE. ORLANDO, FL 32803 STE. 204 ORLANDO, FL 32803 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: ANDREW C. MOLER 06/26/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Change () Addition PSTD () Delete Title: PRFS MOLER, ANDREW C MOLER, ANDREW C MR. Name: Name: 801 N MAGNOLA AVE STE 204 801 N MAGNOLA AVE STE 204 Address: Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32803 () Delete Title: VΡ () Change (X) Addition Title: MOLER. ANDREW C MR. Name: Name: 1256 WYNDHAM PINE DRIVE Address: Address: APOPKA, FL 32712 City-St-Zip: City-St-Zip: () Change (X) Addition () Delete Title: Title: SEC MOLER, ANDREW C MR Name: Name: 1256 WYNDHAM PINE DRIVE Address Address: City-St-Zip: City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: () Change (X) Addition MOLER, ANDREW C MR. Name: Name: Address: Address: 1256 WYNDHAM PINE DRIVE City-St-Zip: City-St-Zip: APOPKA, FL 32712 Title: Title: () Change (X) Addition () Delete MOLER, ANDREW C MR. Name: Name: Address: Address: 1256 WYNDHAM PINE DRIVE City-St-Zip: City-St-Zip: APOPKA, FLORIDA, FL 32712 Title: () Delete Title: () Change (X) Addition MOLER, ANDREW C MR Name: Name: 1256 WYNDHAM PINE DRIVE Address: Address: City-St-Zip: City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW C. MOLER PRES 06/26/2009