2003 FOR PROFIT CORPORATION

Apr 21, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P01000113578 DOCUMENT # 04-21-2003 90441 045 ***150.00 1. Entity Name EHL ENTERPRISES, INC. Mailing Address Principal Place of Business 11001222 14211 SW 22ND STREET 14211 SW 22ND STREET MIAMI EL 33179 MIAMI_EL-93179 2. Principal Place of Business 3. Mailing Address 13742 SW 36 St. SAME CHECK HERE IF MAKING CHANGES 4. FEI Number City & State Applied For City & State 65-1157964 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required =7.* Name and Address of New Registered Agent: d:Address of Current Registered Agent ==== RUIZ-SIERRA, ERNESTO Street Address (P.O. Box Number is Not Acceptable) **14211 SW 22ND STREET MIAMI FL 33179** Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Delete Ruiz-Sierra, ERNesto [] Addition TITLE TITLE RUIZ-SIERRA, ERNESTO 13742 SW 365t. NAME NAME **14211 SW 22ND STREET** STREET ADDRESS STREET ADDRESS MIA, FL 33175 CITY-ST-ZIP MIAMI FL 33179 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME LEE, HARRY NAME STREET ADDRESS 6490 SW 112TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33156 Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME ellzey, leslie STREET ADDRESS STREET ADDRESS 4427 NW 97 CT CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33178 Change ■ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment unit an address, with all other like empowered.

SIGNATURE:

FILED