

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000116497

1. Entity Name
E & S LEGAL OPERATIONS, INC.



Principal Place of Business

150 S. PINE ISLAND RD.
SUITE 320
PLANTATION, FL 33324

Mailing Address

150 S. PINE ISLAND RD.
SUITE 320
PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE



03102008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1159444

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SCHWARTZ, DAVID A ESQ
150 SOUTH PINE ISLAND ROAD
SUITE 320
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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)

DATE

04/21/08-80010-003 150.00

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SCHWARTZ, DAVID A
STREET ADDRESS	150 S. PINE ISLAND RD. # 320
CITY-ST-ZIP	PLANTATION, FL 33324
TITLE	VP
NAME	ETKIN, PATRICIA S
STREET ADDRESS	150 S. PINE ISLAND RD. # 320
CITY-ST-ZIP	PLANTATION, FL 33324
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

David Schwartz PRES.
DAVID A. SCHWARTZ, PRES.

3-11-08 (95A) 472-0199

Date

Daytime Phone #