

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000031478

FILED
Jan 05, 2005
Secretary of State

Entity Name: E S DISTRIBUTION, CORPORATION

Current Principal Place of Business:

3485 TORREMOLINOS AVENUE
MIAMI, FL 33178

New Principal Place of Business:

1600 S BAYSHORE LANE, #9D
COCONUT GROVE, FL 33133

Current Mailing Address:

3485 TORREMOLINOS AVENUE
MIAMI, FL 33178

New Mailing Address:

1600 S BAYSHORE LANE, #9D
COCONUT GROVE, FL 33133

FEI Number: 27-0005638

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE ARMAS, ELOY
3485 TORREMOLINOS AVENUE
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

DE ARMAS, ELOY
1600 S BAYSHORE LANE, # 9D
COCONUT GROVE, FL 33133 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:

01/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DE ARMAS, ELOY
Address: 3485 TORREMOLINOS AVENUE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DE ARMAS, ELOY
Address: 1600 S BAYSHORE LANE, # 9D
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ELOY DE ARMAS

P

01/05/2005

Electronic Signature of Signing Officer or Director

Date