2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Mar 18, 2004 8:00 am **Secretary of State** DOCUMENT # P02000114614 1. Entity Name 03-18-2004 90025 027 ***150.00 E.S.H. INVESTMENT CORP. Principal Place of Business Mailing Address 10870 S.W. 136TH STREET 10870 S.W. 136TH STREET 44019525 **MIAMI FL 33176 MIAMI FL 33176** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) 4. FEI Number Applied For City & State City & State 03-0488933 Not Applicable Žip \$8.75 Additional Country Zip 5. Certificate of Status Desired DADE USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HERRERA, ERWIN S Street Address (P.O. Box Number is Not Acceptable) 10870 S.W. 136TH STREET MIAMI FL 33176 Zip Code 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 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 10. OFFICERS AND DIRECTORS 11. ☐ Change TITLE □ Delete TITLE ☐ Addition HERRERA, ERWIN S NAME NAME 10870 S.W. 136TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33176 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HERRERA, ENZO NAME 5020 S.W. 159TH AVENUE STREET ADDRESS STREET ADDRESS CITY_ST_ZIP_ MIAMI, FL, 33185, CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME FERNANDEZ, LORENA NAME -STREET ADDRESS 7121 S.W. 160TH AVENUE STREET ADDRESS City-St-7IP CITY-ST-7IP MIAMI FL 33193 ☐ Addition Delete TITLE ☐ Change TITLE SANCHEZ, RICHARD NAME NAME 10511 NORTH KENDALL DRIVE STE C 201 STREET ADDRESS STREET ADDRESS MIAMI FL 33176 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 accordate 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.

D NAME OF GIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #