2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachme

SIGNATURE:

Sep 02, 2004 8:00 am DOCUMENT # P03000019002 Secretary of State 1. Entity Name 04-01-2004 90017 027 ***150.00 ECHO DIVIN ENTERPRISES, INC. Principal Place of Business Mailing Address 4855 LINCOLN RD 4855 LINCOLN RD 66433046 **DELRAY BEACH FL 33445 DELRAY BEACH FL 33445** 3. Mailing Address 3. い。 るっエ 2. Principal Place of Business 6723 ーベット Suite, Apt. #, etc MOORE CR2E034 (4/04) Delray City & State City & State Applied For FEI Number 4_FEI Number 55-0875706 elyar Not Applicable Zip Country Country Zip \$8.75 Additional 301 5. Certificate of Status Desired ን482 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FERDINAND, SADRACK Street Address (P.O. Box Number is Not Acceptable) 4855 LINCOLN RD DELRAY BEACH FL 33445 City 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 FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 8, 2004 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Secretary* TITLE TITLE ☐ Delete ☐ Change Addition Sadrack' NAME NAME STREET ADDRESS 4855 circular ad STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREFT ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

FILED

Daytime Phone #

ATTACHMENT 66433046 # P03000019002

Echo Divin Enterprises Inc P.O.Box 6723 Delray Beach, Fl 33482 August 29, 2004

To: Whom ever it may concern.

Unfortunately I have to excuse myself for what happened, about the E.D.E.I annual report. This is the fourth time I'm going to sent that report, because of my own mistake.

Further more the reason of that, is because we just have the name of the corporation and the E.L.N #, but we don't have anything going none yet that is the reason I been sent it back and fourth because I don't have any further information to put in the report. Finally I don't have the copy of the report I was sent to you, but I have the copy of the money order I was sent it with.

Thank you,

And sorry for any further inconvinianse

Sincerely yours,

Secretary

Sadrack Ferdinand