2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000060387

Entity Name: E4GS INC

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12148 ST ANDREWS PLACE 7220 N.W. 36 STREET

306 421

MIRAMAR, FL 33025 US MIAMI, FL 33166 US

Current Mailing Address: New Mailing Address:

12148 ST ANDREWS PLACE 7220 N.W. 36 STREET

4:

MIRAMAR, FL 33025 US MIAMI, FL 33166 US

FEI Number: 56-2426692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

QUESADA, JOSE V DR. MEHMOOD, AMY 11133 SW 8TH STREET 7190 S.W. 14 STREET

306 PEMBROKE PINES, FL 330232018 US

PEMBROKE PINES, FL 33025 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: AMY MEHMOOD 04/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 POLLER, TULIO C MR

 Name:
 POLLER, TULIO C MR

Address: 12154 ST ANDREWS PLACE, # 307 Address: 7190 S.W. 14 STREET

City-St-Zip: MIRAMAR, FL 33025 US City-St-Zip: PEMBROKE PINES, FL 33023-201 US

VΡ Title: VΡ (X) Change () Addition Title: () Delete PEREZ, ALEXANDER L MR Name: Name: PEREZ. ALEXANDER L MR 12154 ST ANDREWS PLACE, #307 251 PALM CIRCLE WEST # 206 Address: Address: MIRAMAR, FL 33025 US PEMBROKE PINES, FL 33025 US City-St-Zip: City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition Name: DELGADO, MARITZA MRS Name: DELGADO, MARITZA MRS Address: 12154 ST ANDREWS PLACE, #307 Address: 7190 S.W. 14 STREET

City-St-Zip: MIRAMAR, FL 33025 US City-St-Zip: PEMBROKE PINES, FL 33023-201 US

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: TULIO POLLER P 04/20/2005