

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059703

Entity Name: EHE PROPERTIES, INC.

FILED
Apr 05, 2005
Secretary of State

Current Principal Place of Business:

10111 NW 24TH PLACE
BUILDING 197 APT. 407
SUNRISE, FL 33322

New Principal Place of Business:

3263 OSPREY LANE
WEST PALM BEACH, FL 334116492 US

Current Mailing Address:

10111 NW 24TH PLACE
BUILDING 197 APT. 407
SUNRISE, FL 33322

New Mailing Address:

3263 OSPREY LANE
WEST PALM BEACH, FL 334116492 US

FEI Number: 20-0880419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELBAZ, ERIC H
10111 NW 24TH PLACE
BUILDING 197 APT. 407
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

ELBAZ, ERIC H PRES
3263 OSPREY LANE
WEST PALM BEACH, FL 334116492 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: ERIC H ELBAZ

04/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ELBAZ, ERIC H
Address: 10111 NW 24TH PLACE
City-St-Zip: SUNRISE, FL 33322

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ELBAZ, ERIC H
Address: 3263 OSPREY LANE
City-St-Zip: WEST PALM BEACH, FL 334116492 US

Title: D () Change (X) Addition
Name: ELBAZ, CAROL
Address: 3263 OSPREY LANE
City-St-Zip: WEST PALM BEACH, FL 334116492 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: DAVID GRIEP

CPA

04/05/2005

Electronic Signature of Signing Officer or Director

Date