## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 20, 2005 8:00 am Secretary of State **DOCUMENT # P04000130276** 04-20-2005 90350 018 \*\*\*150.00 FIRST E & H, INC. Principal Place of Business Mailing Address 4634 LITTLE JOHN TRAIL -4634 LITTLE JOHN TRAIL SARASOTA, FL: 34232: SARASOTA, FL: 34232 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04132005 CR2E034 (10/03) 4. FEI Number 43-2060788 Applied For City & State City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WEINBERG, ELLEN MT Street Address (P.O. Box Number is Not Acceptable) 4634 LITTLE JOHN TRAIL SARASOTA, FL 34232 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ■ Addition TITLE Delete ☐ Change WEINBERG, ELLEN M NAME NAME STREET ADDRESS 4634 LITTLE JOHN TRAIL STREET ADORESS SARASOTA TL 34232 CITY-ST-ZIP CITY-ST-ZIP TITLE D Delete TITLE ☐ Change Addition WEINBERG, HERMAN R\* NAME NAME STREET ADDRESS 4634 LITTLE JOHN TRAIL STREET ADORESS CITY-ST-ZIP SARASOTA, FL 34232 CITY-ST-ZIP TITLE ☐ Change TITLE Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-7P CITY-ST-ZIP

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Daytime Phone #

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 changed, or on an attachment with an address, with all other like empowered. ELLEN M. WEINBERG 941-955-9948 4-13-05 فنفتلا

PPICER OR DIRECTOR