

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000096386

Entity Name: E. S. INTERPRISES INC.

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2179 WINCREST LAKE CIR.  
ORLANDO, FL 32824

**New Principal Place of Business:**

**Current Mailing Address:**

2179 WINCREST LAKE CIR.  
ORLANDO, FL 32824

**New Mailing Address:**

FEI Number: 20-3347496

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARRENO, SILVIA  
2179 WINDCREST LAKE CIRCLE  
ORLANDO, FL 32824 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: CARRENO, SILVIA  
Address: 2179 WINDCREST LAKE CIR.  
City-St-Zip: ORLANDO, FL 32824

I hereby 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 all other like empowered.

SIGNATURE: SILVIA CARRENO

PRES

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date