

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

1. Corporation Name

ESM, Inc.

P93000052363

Principal Place of Business

Mailing Address

235 LINCOLN RD
#320

Miami Beach FL 33139-3157

235 LINCOLN RD
#320

Miami Beach FL 33139-3157

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 235 LINCOLN RD	26 235 LINCOLN RD
22 Suite, Apt. #, etc Suite 320	27 Suite, Apt. #, etc Suite 320
23 City & State Miami Beach FL	28 City & State Miami Beach FL
24 Zip 33139-3157	29 Zip 33139-3157
25 Country USA	30 Country USA

3. Date Incorporated or Qualified

12-93

4. FEI Number

65-0453999

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

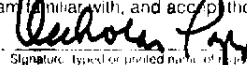
8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30 ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name	Nicholas Papp
82 Street Address (P.O. Box Number is Not Acceptable)	235 LINCOLN RD #320
83	
84 City	Miami Beach
85 FL	
86 Zip Code	33139

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

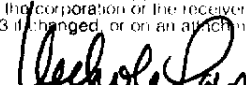
SIGNATURE:  Nicholas Papp 1-26-98

Signature, typed or printed name of registered agent and the applicant (NOT Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President ☐ DELETE	11 TITLE	President ☒ Change ☐ Addition
NAME	Nicholas Papp	12 NAME	Nicholas Papp
STREET ADDRESS	360 Meridian Ave #6E	13 STREET ADDRESS	360 Meridian Ave #6-E
CITY-ST-ZIP	Miami Beach, FL 33139-8745	14 CITY-ST-ZIP	Miami Beach, FL 33139-8745
TITLE	Secretary ☐ DELETE	21 TITLE	☒ Change ☐ Addition
NAME	Nicholas Papp	22 NAME	
STREET ADDRESS	360 Meridian Ave #6-E	23 STREET ADDRESS	
CITY-ST-ZIP	Miami Beach FL 33139-8745	24 CITY-ST-ZIP	
TITLE	Treasurer ☐ DELETE	31 TITLE	☒ Change ☐ Addition
NAME	Nicholas Papp	32 NAME	
STREET ADDRESS	360 Meridian Ave #6E	33 STREET ADDRESS	
CITY-ST-ZIP	Miami Beach FL 33139-8745	34 CITY-ST-ZIP	
TITLE	☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  Nicholas Papp President 1-26-98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

FILED

CR2E034 (10/97)