

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90088 012 ***150.00

DOCUMENT # P9400008424 (1) EST ENTERPRISES, INC.

Principal Place of Business Mailing Address 3899 NW 7th St #203 MIAMI, FL 33126 SAME

DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 2/2/1994 4. FEI Number 65-0465047 Applied For Not Applicable 5. Certificate of Status Desired X \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 3. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 2a. Mailing Address 3899 NW 7th St #203 MIAMI, FL 33126 US 26. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 28. City & State 29. Zip 30. Country

9. Name and Address of Current Registered Agent Albert NAE 3899 NW 7th St #203 MIAMI, FL 33126

10. Name and Address of New Registered Agent 81. Name Albert NAE 82. Street Address (P.O. Box Number is Not Acceptable) 3899 NW 7th St #203 83. 84. City MIAMI FL 85. Zip Code 33126

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 Albert NAE 4/29/99

Table with 12 columns: OFFICERS AND DIRECTORS. Includes fields for Title, Name, Street Address, City-St-Zip, and a DELETED checkbox.

Table with 13 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for Title, Name, Street Address, City-St-Zip, and checkboxes for Change and Addition.

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, with all other like empowered.

SIGNATURE: Albert NAE 4/29/99 305-541-3980 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)