2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 19, 2003 8:00 am Secretary of State 05-19-2003 90228 008 ***150.00

1. Entity Nan	MENT # P94000	0086450 ENS CORP.	` _/		03-19-2003 90228 008 130	.00	
Principal Place of Business 7941 SW 104 STREET MIAMI FL 33156 US		Mailing Address 180 SOUTH BROADWAY WHITE PLAINS NY 10605					
2. Principal Place of Business		3. Mailing Address			A SECUMBER USA MARIN OLEN BERN OLEN OCH PRINCE MARIN BRITT BROTT DURF	(11) (44)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State			4. FEI Number 13-3796891 Applied For Not Applicable		
Zip Country		Zip Coun		try	5. Certificate of Status Desired S8.75 Addition Fee Required	nal	
	6. Name and Address of Current R	legistered Agent			7. Name and Address of New Registered Agent		
				Name			
MALE, MICHAEL H 3250 MARY STREET				Street Address	Street Address (P.O. Box Number is Not Acceptable)		
SUITE 303	3			·			
MIAMI FL			City		FL Zip Code		
	enamed entity submits this statement for tions of registered agent.	the purpose of changing its	registere	ed office or registe	ered agent, or both, in the State of Florida. I am familiar with, and	accept	
SIGNATURE	Signature, typed or printed name of registered agent sm	id 6th il applicable (NOTE	: Pegistere	d Agent signature require	od when reinstating)		
After May 1, 2003 Fee will be \$550.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		State	te grade		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		
	OFFICERS AND D			· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	1	
10. 5	PSD OFFICERS AND D		11.	· · · · · · · · · · · · · · · · · · ·			
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12. I hereby c	ertify that the information supplied with the on this report or supplemental report is to	nis filing does not qualify for	the exen	nption stated in Source shall bave the	action 119.07(3)(i), Florida Statutes: I further certify that the inform same legal effect as if made under oath; that I am an officer or di	nation rector	

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.

SIGNATURE: