

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
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90114 038 ***150.00

DOCUMENT # P95000085006

1. Corporation Name
ESI PHILIPPINES, INC.

Principal Place of Business
700 UNIVERSE BLVD.
JUNO BEACH FL 33408

Mailing Address
ATTN: FRANCES M. CARPENTER
700 UNIVERSE BLVD.
JUNO BEACH FL 33408



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/02/1995

4. FEI Number

65-0625758

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

As Attached
XX Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEON, J. E
9250 W. FLAGLER STREET
MIAMI FL 33174

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DV ☒ DELETE
NAME CARPENTER, LARRY K
STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
CITY-ST-ZIP NORTH PALM BEACH FL 33408

1.1 TITLE D/P ☐ Change ☒ Addition
1.2 NAME Yackira, Michael W.
1.3 STREET ADDRESS 700 Universe Blvd.
1.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE DP ☒ DELETE
NAME GELBER, LESLIE J
STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
CITY-ST-ZIP NORTH PALM BEACH FL 33408

2.1 TITLE D/V ☐ Change ☒ Addition
2.2 NAME Hoffman, Kenneth P.
2.3 STREET ADDRESS 700 Universe Blvd.
2.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE DT ☒ DELETE
NAME BOYLAN, PETER
STREET ADDRESS 11760 US HWY 1, STE 600
CITY-ST-ZIP N PALM BCH FL 33408

3.1 TITLE D/T ☐ Change ☒ Addition
3.2 NAME Boylan, Peter D.
3.3 STREET ADDRESS 700 Universe Blvd.
3.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE S ☒ DELETE
NAME CARPENTER, FRANCES M
STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
CITY-ST-ZIP NORTH PALM BEACH FL 33408

4.1 TITLE S ☐ Change ☒ Addition
4.2 NAME Carpenter, Frances M.
4.3 STREET ADDRESS 700 Universe Blvd.
4.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE AS ☒ DELETE
NAME HATHAWAY, SCOT C
STREET ADDRESS 11760 US HWY 1, STE 600
CITY-ST-ZIP N PALM BCH FL 33408

5.1 TITLE AS ☐ Change ☒ Addition
5.2 NAME Hathaway, Scot C.
5.3 STREET ADDRESS 700 Universe Blvd.
5.4 CITY-ST-ZIP Juno Beach FL 33408

TITLE AS ☒ DELETE
NAME PONDER, STEPHEN H
STREET ADDRESS 11760 US HWY 1, STE 600
CITY-ST-ZIP N PALM BCH FL 33408

6.1 TITLE AS ☐ Change ☒ Addition
6.2 NAME Ponder, Stephen H.
6.3 STREET ADDRESS 700 Universe Blvd.
6.4 CITY-ST-ZIP Juno Beach FL 33408

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:

FRANCES M. CARPENTER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/99
Date

561-691-7171
Daytime Phone #

CR2E034 (11/98)