2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2005
Secretary of State

DOCUMENT# P96000016968

Entity Name: ESKEBEE, INC.

Current Principal Place of Business:

4140 WEST HWY 90
LAKE CITY, FL 32055

New Principal Place of Business:

2016 WEST HWY 90
LAKE CITY, FL 32055

Current Mailing Address:

4140 WEST HWY 90
LAKE CITY, FL 32055

New Mailing Address:

2016 WEST HWY 90
LAKE CITY, FL 32055

FEI Number: 59-3365908 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KANAGASABAPATHY, BALESWARAN
4140 WEST HWY 90
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

KANAGASABAPATHY, BALESWARAN
2016 WEST HWY 90
LAKE CITY, FL 32055 US

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: 02/01/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KANAGASABAPATHY, BALESWARAN
Address: 4140 WEST HWY 90
City-St-Zip: LAKE CITY, FL 32055

Title: D ( ) Delete
Name: BALESWARAN, THAYALNAYAGY
Address: 4140 WEST HWY 90
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KANAGASABAPATHY, BALESWARAN
Address: 2016 WEST HWY 90
City-St-Zip: LAKE CITY, FL 32055

Title: D (X) Change ( ) Addition
Name: BALESWARAN, THAYALNAYAGY
Address: 2016 WEST HWY 90
City-St-Zip: LAKE CITY, FL 32055

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KANAGASABAPATHY BALESWARAN P 02/01/2005
Electronic Signature of Signing Officer or Director — Date