2005 FOR PROFIT CORPORATION

May 02, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P96000103022 E A S ENTERPRISES, INC. Principal Place of Business Mailing Address 912 W. MARTIN LUTHER KING, JR. BLVD. 912 W. MARTIN LUTHER KING, IR. BLVD. TAMPA, FL 33603 TAMPA, FL 33603 03182005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3416340 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SIERRA, PAUL J DO NOT WRITE 912 W. MARTIN LUTHER KING, JR. BLVD. TAMPA, FL 33603 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, lyped or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME SIERRA, PAUL J STREET ADDRESS 912 W. MARTIN LUTHER KING, JR. BLVD. CITY-ST-ZIP TAMPA, FL 33603 U00000356388 --05/04/05-80033-005_158,75 DVST TITLE SIERRA, ELISE A 912 W. MARTIN LUTHER KING, JR. BLVD. STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33603 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered

Sama SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTO

TITLE

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

4-20-05

FILED