2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000103022

1. Entity Name

E A S ENTERPRISES, INC.



40107560

SIERRA, PAUL J

Principal Place of Business

912 W. MARTIN LUTHER KING, JR. BLVD. TAMPA, FL 33603

Mailing Address

912 W. MARTIN LUTHER KING, JR. BLVD. TAMPA, FL 33603

DO NOT WRITE IN THIS SPACE

è. Name and Address of Current Registered Agent

|--|

Jun 04, 2008 8:00 am

Secretary of State

06-04-2008 90004 024 ***158.75

04082008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3416340

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

DO NOT WRITE

912 W. MARTIN LUTHER KING, JR. BLVD. TAMPA, FL 33603				IN THIS SPACE			
	named entity submits this statement for the pions of registered agent.	urpose of changing its regist	ered office or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and acc	cept	
SIGNATURE	Signature, typed or printed name of registered agent and title	d applicable. (NOTE: Regist	ered Agent signatur	required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SIERRA, PAUL J 912 W. MARTIN LUTHER KING, JR. BLVD. TAMPA, FL 33603 DVST SIERRA, ELISE A 912 W. MARTIN LUTHER KING, JR. BLVD. TAMPA, FL 33603						
NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						;	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-\$1-ZIP

> ers Derra SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elise Siema

4-29-08

228-6661

Date