2004 FOR PROFIT CORPORATION

-Apr 21, 2004 08:00 AM ANNUAL REPORT **Secretary of State DOCUMENT # P97000074224** 1. Entity Name E'S JANITORIAL CORP. Principal Place of Business Mailing Address 15525SW 209 AVE. 15525SW 209 AVE. MIAMI, FL 33187 MIAMI, FL 33187 CR2E034 (10/03) 04172004 No Cho-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0777143 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AMERILAWYER CHARTERED DO NOT WRITE 343 ALMERIA AVENUE CORAL GABLES, FL 33134 IN THIS SPACE 8. The above named entity submits this statement for the purpase 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 ament. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be H000000123112 FiLE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (14/21/04-80058-002 150.00 OFFICERS AND DIRECTORS 10. PSTD TILE ELLIS, MELVIN 12260 SOUTHWEST 184TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33177 THEF STREET ADDRESS CITY-\$1-21P NAME STREET ADDRESS DO NOT WRITE CHY-ST-ZW IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules, if 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 time in provided.

SIGNATURE.

HAME STREET ADDRESS CRTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Melvin Ellis

4-17-04

FILED