## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P99000077253

1. Entity Name E&I ENTERPRISES INC.

Principal Place of Business

128 N.E. 1ST STREET MIAMI, FL 33132 Mailing Address

128 N.E. 1ST STREET MIAMI, FL 33132

## FILED Apr 16, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

04112007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0944734

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ISSA, NASRUDDIN 128 N.E. 1ST STREET MIAMI, FL 33132

SIGNATURE:

## DO NOT WRITE 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00		D. Election Campaign Financing Trust Fund Contribution.   \$5.00 May Be Added to Fees		U00000706397 04/24/07-80631-019 150.00	
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY+ST-ZIP	D ISSA, NASRUDDIN 128 N.E. 1ST STREET MIAMI, FL 33132					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISSA, SHABANA N 128 N.E. 1ST STREET MIAMI, FL 33132					
THE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 cath; 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.						

INTED NAME OF SIGNING OFFICER OR DIRECTOR