FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
MAY 13 PM 10: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S59706 (9)

1. Corporation Name
E.N.P. ENTERPRISE, INC.

Principal Place of Business
15715 SW 153 AVE
MIAMI FL 33187

Mailing Address
15715 SW 153 AVE
MIAMI FL 33187

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/12/1991
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0267306 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 ☐ Yes ☐ No

2. Principal Place of Business | 2a. Mailing Address
Suite, Apt. #, etc. | Suite, Apt. #, etc.
City & State | City & State
Zip | Country | Zip | Country

9. Name and Address of Current Registered Agent

DUARTE, ERNESTO
15715 SW 153 AVE
MIAMI FL 33187

10. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City — FL — Zip Code

11. Pursuant to the provisions of sections 607.1508 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	
TITLE	P
NAME	DUARTE, ERNESTO
STREET ADDR	15715 SW 153 AVE
CITY-ST-ZIP	MIAMI, FL 33187
TITLE	S
NAME	DUARTE, PATRICIA
STREET ADDR	15715 SW 153 AVE
CITY-ST-ZIP	MIAMI, FL 33187

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition — TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Patricia Duarte
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95 (305) 232-2824
Date — Daytime Phone

0208059 CP