

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 23 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 717319 (8)

1. Corporation Name

EMERALD GREEN SECTION ONE, INC.

Principal Place of Business

3501 KEYSER AVE #6
HOLLYWOOD FL 33021

Mailing Address

3501 KEYSER AVE #6
HOLLYWOOD FL 33021-2455

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified
10/08/19693a. Date of Last Report
01/25/19964. FEI Number
59-1350678Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALDMAN, LOUIS
3501 KEYSER AVE. #6
HOLLYWOOD FL 33021

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME BARQUINERO, JOSEPH
STREET ADDRESS 3501 N KEYSER AVE #10
CITY-ST-ZIP HOLLYWOOD FLTITLE D ☐ DELETE
NAME VOYE, NANCY
STREET ADDRESS 3501 N KEYSER AVE #8
CITY-ST-ZIP HOLLYWOOD FLTITLE PD ☐ DELETE
NAME WALDMAN, LOUIS
STREET ADDRESS 3501 N KEYSER AVENUE #6
CITY-ST-ZIP HOLLYWOOD FLTITLE TD ☐ DELETE
NAME WALDMAN, SHIRLEY
STREET ADDRESS 3501 N KEYSER AVENUE #6
CITY-ST-ZIP HOLLYWOOD FLTITLE D ☐ DELETE
NAME SCHLINSKY, HARRIET
STREET ADDRESS 3501 N KEYSER AVE #7
CITY-ST-ZIP HOLLYWOOD FLTITLE D ☐ DELETE
NAME GALLO, ALFRED
STREET ADDRESS 3501 N KEYSER AVE #5
CITY-ST-ZIP HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SD ☐ Change ☒ Addition
1.2 NAME GROVER C. FARR, JR.
1.3 STREET ADDRESS 3501 N KEYSER AVE. #4
1.4 CITY-ST-ZIP HOLLYWOOD, FL.2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0021558

CR2E037 (9/96)