

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 723249 (9)

1. Corporation Name
EMERALD GREEN SECTION FOUR, INC.



Principal Place of Business: 3501 KEYSER AVE. VILLA #37 HOLLYWOOD FL 33021
Mailing Address: 3501 KEYSER AVE. VILLA #37 HOLLYWOOD FL 33021

3. Date Incorporated or Qualified: 04/24/1972
3a. Date of Last Report: 03/08/1995
4. FEI Number: 59-1514402
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, Florida Statutes: Yes No

2. Principal Place of Business: 21
2a. Mailing Address: 26
22. Suite, Apt. #, etc.: VILLA #61
27. Suite, Apt. #, etc.: VILLA #61
23. City & State
28. City & State
24. Zip: 25. Country: 29. Zip: 30. Country:

9. Name and Address of Current Registered Agent
BENDEL, WILLIAM
3501 KEYSER AVE. VILLA #62
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent
81 Name: PARIS MILTON
82 Street Address (P.O. Box Number is Not Acceptable): 3501 KEYSER AVE VILLA #61
83
84 City: HOLLYWOOD FL 85 Zip Code: 33021

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: *Milton Paris* (Signature typed or printed name of registered agent and title if applicable) MILTON PARIS (NOTE: Registered Agent signature required when re-registering) 1-15-96 DATE

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	ARON, ADRIENNA
STREET ADDRESS	3501 KEYSER AVENUE, #67
CITY - ST - ZIP	HOLLYWOOD, FL
TITLE	VD <input type="checkbox"/> DELETE
NAME	BLANKET, ROBERT
STREET ADDRESS	3501 KEYSER AVENUE, #55
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	D <input type="checkbox"/> DELETE
NAME	MILLER, BERNICE
STREET ADDRESS	3501 KEYSER AVENUE, #54
CITY - ST - ZIP	HOLLYWOOD, FL
TITLE	D <input type="checkbox"/> DELETE
NAME	KRUPNICK, ELLEN
STREET ADDRESS	3501 KEYSER AVENUE, #66
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	STD <input type="checkbox"/> DELETE
NAME	KAPLAN, BURLEIGH
STREET ADDRESS	3501 KEYSER AVE. VILLA #37
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	PD <input checked="" type="checkbox"/> DELETE
NAME	PARIS, MILTON
STREET ADDRESS	3501 KEYSER AVE. VILLA #61
CITY - ST - ZIP	HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '2	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	BENDEL, WILLIAM
6.3 STREET ADDRESS	3501 N. KEYSER AVE. VILLA #61
6.4 CITY - ST - ZIP	HOLLYWOOD FL 33021

14. I do 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)(k), 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: *Milton Paris* - PRES 1-27-96 954-985-0486
MILTON PARIS
Date: 1-27-96 Telephone #: 954-985-0486

CR2E037 (12/95)