

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

04-20-2006 90168 029 \*\*\*\*61.25

**DOCUMENT # 723249**

1. Entity Name  
**EMERALD GREEN SECTION FOUR, INC.**



Principal Place of Business  
**3501 KEYSER AVE.  
VILLA 61  
HOLLYWOOD, FL 33021 US**

Mailing Address  
**3501 KEYSER AVE.  
VILLA 61  
HOLLYWOOD, FL 33021 US**

4003300



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04122006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-1514402**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PARIS, MILTON  
3501 N. KEYSER AVENUE  
VILLA #61  
HOLLYWOOD, FL 33021**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **D NEUMAN, ALAN**  
STREET ADDRESS **3501 KEYSER AVG 37**  
CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE ☐ Delete  
NAME **P MEYER, JOANNE**  
STREET ADDRESS **3501 KEYSER AVE #60**  
CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE ☐ Delete  
NAME **D ROSE, ADELE**  
STREET ADDRESS **3501 N. KEYSER #57**  
CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE ☐ Delete  
NAME **VD LERNER, LEON**  
STREET ADDRESS **3501 KEYSER AVENUE #69**  
CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE ☐ Delete  
NAME **D SABRA, MIRIAM**  
STREET ADDRESS **3501 KEYSER AVENUE #58**  
CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE ☐ Delete  
NAME **D PARIS, MILTON**  
STREET ADDRESS **3501 N KEYSER AVENUE, VILLA 61**  
CITY-ST-ZIP **HOLLYWOOD, FL 33021**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition  
NAME **ADRIAN ARON**  
STREET ADDRESS **3501 N. KEYSER AVE # 67**  
CITY-ST-ZIP **Hollywood, FL 33021**

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

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

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

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

TITLE ☐ Change ☐ Addition  
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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/16/06**  
Date

**954 966 4467**  
Daytime Phone #