

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L83955

FILED  
Apr 06, 2008  
Secretary of State

Entity Name: EMERALD ENTERPRISES, INC.

## Current Principal Place of Business:

8 TRANSYLVANIA AVE.  
KEY LARGO, FL 33037 US

## New Principal Place of Business:

## Current Mailing Address:

8 TRANSYLVANIA AVE.  
KEY LARGO, FL 33037 US

## New Mailing Address:

FEI Number: 65-0202912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUILLERMO, CASTILLO  
8 TRANSYLVANIA AVE.  
KEY LARGO, FL 33037 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete  
Name: ESCORCIA, HELVIA P  
Address: 520 E 44 ST  
City-St-Zip: HIALEAH, FL 33012

Title: TD ( ) Delete  
Name: CASTILLO, DELIA E.  
Address: 520 E 44TH ST  
City-St-Zip: HIALEAH, FL

Title: CD ( ) Delete  
Name: LLAURADO, ISABEL  
Address: 301 174 ST #1220  
City-St-Zip: MIAMI BEACH, FL

Title: PD ( ) Delete  
Name: CASTILLO, GUILLERMO  
Address: 8 TRANSYLVANIA AVE.  
City-St-Zip: KEY LARGO, FL 33137

Title: SD ( ) Delete  
Name: SIMOSA, JORGE A  
Address: 7911 NW 172 ST  
City-St-Zip: MIAMI, FL 33015

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GUILLERMO CASTILLO

PD

04/06/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date