

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000077473

FILED
Jun 15, 2009
Secretary of State

Entity Name: EMO FINANCIAL SERVICES, CORP.

Current Principal Place of Business:

7753 SW 193RD STREET
MIAMI, FL 33157 US

New Principal Place of Business:

18835 SW 76 CT
MIAMI, FL 33157 US

Current Mailing Address:

7753 SW 193RD STREET
MIAMI, FL 33157 US

New Mailing Address:

18835 SW 76 CT
MIAMI, FL 33157 US

FEI Number: 90-0408469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BW & T BUSINESS ADVISERS, INC.
9050 PINES BLVD
450
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

ROJAS, ALDEMAR
18835 SW 76 CT
MIAMI, FL 33157 US

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: ALDEMAR ROJAS

06/15/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROJAS, ALDEMAR
Address: 7753 SW 193RD STREET
City-St-Zip: MIAMI, FL 33157 US

Title: PD () Delete
Name: MOSQUERA, ELEANORA
Address: 7753 SW 193RD STREET
City-St-Zip: MIAMI, FL 33157 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROJAS, ALDEMAR
Address: 18835 SW 76 CT
City-St-Zip: MIAMI, FL 33157 US

Title: PD (X) Change () Addition
Name: MOSQUERA, ELEANORA
Address: 9343 SW 227 ST SUITE#5
City-St-Zip: MIAMI, FL 33190 US

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: ALDEMAR ROJAS

PD

06/15/2009

Electronic Signature of Signing Officer or Director

Date