FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 280613

(1)

EMBCO, INC.

FILED May 16 1997 8:00am Secretary of State

EMBCC), INC										
Principa' Plad	ce of Business	Mailing Ad	dress				f though those boter about nithe than	å kitt finit blåt	i Milaat Arani Alba	I MARKI LARI	
6917 COLLINS AVENUE 6917 COLLINS AVENUE MIAMI BEACH FL 33141 MIAMI BEACH FL 33141-3263											
							3. Date Incorporated or Qualifit 04/20/1964		Date of Last 6 /08/1996	Report	
2. Principal I	Place of Business	2a. Mailing	Address				4. FEI Number		L A	pplied For	
21		26	· · · · · · · · · · · · · · · · · · ·				59-1038358			lot Applicable	
Surte, Apt 22	t. #, elc	Suite, #	kpt. #, etc.				5. Certificate of Status Desired			Additional lequired	
City & Sta	ite	City & S	State				6. Election Campaign Financin			May Be	
23		28		- 			Trust Fund Contribution	U		to Fees	
<i>Т</i> ф	Country	Zip		\vdash	untry		8. This corporation has liability			s. 199.032,	
24	25	29		30			Florida Statutes		∐ No	<u> </u>	
	9, Name and Address of Curr	rent Hegistered A	gent		81	11	10. Name and Address of Nev	Hegistered	Agent		
	STOR, BRENDA				[81	Name					
6917 COLLINS AVENUE MIAMI BEACH FL 33141					82	Street A	Address (P.O. Box Number is Not Acce	ess (P.O. Box Number is Not Acceptable)			
					63						
					84	City		FI	85 Zip	Code	
office or agent 1 SIGNATURE							corporation submits this statement for to coration's board of directors. I hereby a required when reinstating)	ccept the ap	pointment as	s registered	
12,		AND DIRECTORS		13.			ADDITIONS/CHANGES TO C	FFICERS AN	ND DIRECTO	RS IN 12	
TIFLE	PD		DELETE	1.1 T	ITLE	T			Change	Addition	
NAME	POSNER, VICTOR			1.2 N	AME						
STREET ADORESS				1.3 S	TREET	ADDRESS					
CO y - ST - 202	MIAMI BEACH FL 33141			1.4 (ITY-S	T-ZIP					
TOTE	EVP		DELETE	2.1 T	ITLE				Change	☐ Addition	
NAME	COLVIN, MELVIN R			221	IAME	}					
STHEFT ADDRESS	*****			2.3 5	TREET	ADDRESS					
City - ST - ZIP	MIAMI BEACH FL 33141			2.4	CITY-S	ST-ZIP					
TIFLE	TS		DELETE	3.1 7	ITLE				Change	Addition	
NAME	STRASSBERG, BLANCHE			£21	IAME	>	Launer, Blanch	દ ૭.	•		
STREET ADDRESS				3.3 5	TREET	ADDRESS	•				
CITY ST-7IF	MIAMI BEACH FL 33141			3.4.	CITY-S	ST-ZIP					
TITLE	VTD		DELETE	4.1 1	ITLE				Change	Addition	
NAME	POSNER, GAIL			4.2	NAME						
STREET ADDRESS				4.3 5	TAEET	ADDRESS					
CITY-S1-ZIP	MIAMI BEACH FL 33141			4.4 (ITY-S	T-ZIP					
THEF	EVD		DELETE	5.13	ITLE				Change	Addition	
NAME	NESTOR, BRENDA			5.2 6	IAME						
STREET ADORESS				5.3 8	STREET	ADDRESS					
CHT+-S!-ZIP	MIAMI BCH FL 33141				HTY-S	T-ZIP					
11716	VD		DEFELE	6.1]	IJLE.	_ 1	C. 14 (: N		Change	Addition	
NAME	MOTTRAM, LISA			6.21	VAME	ノ	Field, Lisa M.				
STREET ADDRESS				6.3 \$	TREET	ADDRESS	•				
CITY - 51 - 21P	MIAMI BCH FL 33141			6.4 (ITY-S	T-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 607, Florida Statutes; and that my name appears in Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND THE OR PRINTED NAME OF BUSING OFFICER OR DIRECTOR

4/29/97 (305) 866-7273

MIGRAGO