

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montoya
Secretary of State
OFFICE OF CORPORATIONS

DOCUMENT # **401731** (5)
1. Corporation Name
EMD, INC.

APPROVED
AND
FILED

MAY -1 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**3961 NORTH 39TH AVE
HOLLYWOOD FL 33021-1807**

Mailing Address
**3961 NORTH 39TH AVE
HOLLYWOOD FL 33021-1807**

Do not write in this space

3. Date being reported or Quasiest 05/23/1972	3a. Date of Last Report 05/01/1994
4. FCI Number 59-2399380	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contributions ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under its foreign Florida Statutes. ☒ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
State Apartment 22	State Apartment 27
City & State 23	City & State 28
Zip 24	Zip 25
Zip 29	Zip 30

9. Name and Address of Current Registered Agent

**CALDERIN, EDWARD
3961 N. 39 AVENUE
HOLLYWOOD FL 33023**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** **85 Zip Code**

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3) 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 607.01(2) Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN '95	
OFFICER	NAME STREET ADDRESS CITY, STATE, ZIP	OFFICER	NAME STREET ADDRESS CITY, STATE, ZIP
NAME	PD CALDERIN, EDWARD 3961 N. 39 AVENUE HOLLYWOOD FL	NAME	
NAME	V CALDERIN, MATTHEW 3961 N. 39 AVENUE HOLLYWOOD FL	NAME	
NAME	DST CALDERIN, DOROTHEA 3961 N. 39 AVENUE HOLLYWOOD FL	NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 139.01(2)(b), Florida Statutes. I further certify that the information included 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 Block 12 or Block 13 of this filing, or on an attachment with an address.

SIGNATURE:

Edward Calderin
EDWARD CALDERIN

4/30/95