2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

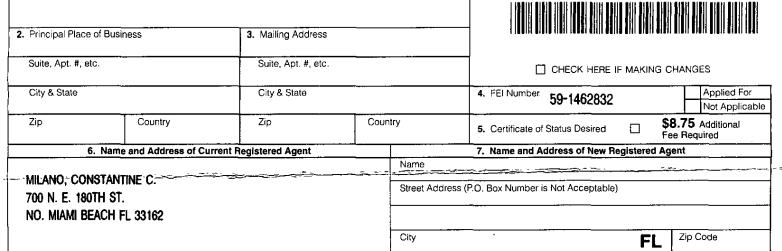
NORTH MIAMI BEACH FL 33162



Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90471 006 ***150.00

DOCUMENT # i. Entity Name EMARDE, INC.	427506	
Principal Place of Business 700 N.E. 180TH STREET	Mailing Address 700 N.E. 180TH STREET	•

NORTH MIAMI BEACH FL 33162



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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

	¥			
10. OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Belete FRANGESH, WILLIAM 19731 NE 13TH COURT N MIAMI BEACH FL 33179	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Delete PREISTLEY, DOLORIS J. 11121 NE 9TH CT BISCAYNE PARK FL 33161	TITLE NAME STREET ADDRESS CITY-ST-ZIP	· Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Delete	NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Delete NICK MILANO \$104 LITY CENTER FLDB33573.	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	

12. I 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 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 607, Florida Statutes; and that my name appears in Block or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (10/02)