



2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2004 8:00 am
Secretary of State

03-17-2004 90013 020 ***150.00

DOCUMENT # 841168 1. Entity Name EMGIFO, N.V. INC.					
Principal Place of Business C/O FEDER 2450 HOLLYWOOD BLVD STE 401 HOLLYWOOD FL 33020 US			Mailing Address C/O FEDER 2450 HOLLYWOOD BLVD STE 401 HOLLYWOOD FL 33020 US		
2. Principal Place of Business 3900 Hollywood Blvd Suite, Apt. #, etc. Suite 103 City & State Hollywood FL Zip 33021 Country USA		3. Mailing Address 3900 Hollywood Blvd. Suite, Apt. #, etc. Suite 103 City & State Hollywood FL Zip 33021 Country USA		 MOORE CR2E034 (11/03)	
4. FEI Number 65-0051787				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent FEDER, LAWRENCE H 2450 HOLLYWOOD BLVD STE 401 HOLLYWOOD FL 33020	
7. Name and Address of New Registered Agent Name Lawrence H. Feder Street Address (P.O. Box Number is Not Acceptable) 3900 Hollywood Blvd. #103 Suite 103 City Hollywood State FL Zip Code 33021				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 Lawrence H. Feder Lawrence H. Feder DATE 3/10/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD REINGIFO, EMILIA P 2450 HOLLYWOOD BLVD #401 HOLLYWOOD FL 33020	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/O REINGIFO, EMILIA P 3900 Hollywood Blvd. #103 Hollywood, FL 33021
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: EMILIA P. REINGIFO 3/10/04 954 3221012 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					