

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000533

FILED
Feb 27, 2009
Secretary of State

Entity Name: EMI ENTERTAINMENT MANAGEMENT, INC.

Current Principal Place of Business:

2881 E OAKLAND PARK BLVD., SUITE 410
FORT LAUDERDALE, FL 33306

New Principal Place of Business:

385 OAKVIEW DRIVE
DELRAY BEACH, FL 33445

Current Mailing Address:

2881 E OAKLAND PARK BLVD., SUITE 410
FORT LAUDERDALE, FL 33306

New Mailing Address:

385 OAKVIEW DRIVE
DELRAY BEACH, FL 33445

FEI Number: 91-2100719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGLEY, DAVID W
8181 W BROWARD BLVD., SUITE 204
PLANTATION, FL 333242049 US

Name and Address of New Registered Agent:

TALESMAN, DARILYN L
385 OAKVIEW DRIVE
DELRAY BEACH, FL 33445 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: DARILYN L. TALESMAN

02/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: TALESMAN, CRAIG
Address: 8181 W BROWARD BLVD., SUITE 204
City-St-Zip: PLANTATION, FL 333242049

Title: VTD (X) Delete
Name: TALESMAN, DARILYN L
Address: 8181 W BROWARD BLVD STE 204
City-St-Zip: PLANTATION, FL 333242049

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TALESMAN, DARILYN L
Address: 385 OAKVIEW DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DARILYN L. TALESMAN

PD

02/27/2009

Electronic Signature of Signing Officer or Director

Date