2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000672

Entity Name: THE EMO AGENCY, INC.

BURBANK, CA 91504

City-St-Zip:

FILED Apr 30, 2007 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
	DALE COURTON, VA 2018				
Current Mailing Address:			New Mailing Address:		
	DALE COURTON, VA 2018				
FEI Number:	: 54-1536431	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
1267 BÉRI STE 200	OHN D PC KSHIRE LANE SPRINGS, FL				
	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	NORDEN, CHE	WOOD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (BOPP, ELEAN 11004 LEES M REMINGTON,	1ILL RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (HALL, MARTH/ 350 WHITE FE MILL SPRINGS	NCE LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	MORAN, DENN) Delete IIS MICHAEL SAN FERNANDO BLVD	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: ELEANOR S. BOPP SD 04/30/2007