## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000003989

Entity Name: EMERGITECH, INC.

City-St-Zip: HILLIARD, OH 43026

FILED Jan 21, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
6434 E. MA REYNOLD	AIN ST. DSBURG, OH	43068			
Current Mailing Address:			New Mailing Address:		
6434 E. MA REYNOLD	AIN ST. DSBURG, OH	43068			
FEI Number	: 31-1108800	FEI Number Applied For ( )	FEI Number Not App	icable ( ) Certific	ate of Status Desired ( )
Name and	Address of (	Current Registered Agent:	Name and	Address of New Re	gistered Agent:
2731 EXEOWESTON, The above	, FL 33331	DRIVE, SUITE 4 US submits this statement for the	purpose of changing i	s registered office or	registered agent, or both,
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent		Date
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANGES TO OF	FICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	COLLINS, MAR 6434 E MAIN S		Title: Name: Address: City-St-Zip:	()Change	( ) Addition
Title: Name: Address: City-St-Zip:	TANG, JUIPON	AVEN COURT N	Title: Name: Address: City-St-Zip:	()Change	( ) Addition
Title: Name: Address: City-St-Zip:	VC ( WU, WEI - TSI 854 PIPESTON COLUMBUS, C	IE DRIVE	Title: Name: Address: City-St-Zip:	()Change	( ) Addition
Title: Name: Address: City-St-Zip:	D ( OH, WONHA 5038 REED RO COLUMBUS, C		Title: Name: Address: City-St-Zip:	D (X) Change OH, WONHA 2545 FARMERS DRIVE, COLUMBUS, OH 43235	
Title: Name: Address:	D ( WATERS, JOH 3807 CONFLU		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: MARK E. COLLINS P 01/21/2008