

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F61499

1. Entity Name

E. M. S. MANAGEMENT, INC.

Principal Place of Business

1050 NW 1ST AVE  
SUITE 11  
BOCA RATON FL 33432  
US

Mailing Address

1050 NW 1ST AVE  
SUITE 11  
BOCA RATON FL 33432  
US

2. Principal Place of Business

3201 N.W. 26TH COURT

3. Mailing Address

SAME AS # 2

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BOCA RATON, FLORIDA

City & State

4. FEI Number 59-2237945

Applied For

Not Applicable

Zip 33434

Country USA

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STRATI, ELIE

3201 NW 26TH COURT

BOCA RATON FL 33434

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVTD  
NAME STRATI, ELIE  
STREET ADDRESS 3201 NW 26TH COURT  
CITY-ST-ZIP BOCA RATON FL

TITLE P M  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ST  
NAME STRATI, MARCELLE  
STREET ADDRESS 3201 NW 26TH CT  
CITY-ST-ZIP BOCA RATON FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP  
NAME STRATI, ALAN  
STREET ADDRESS 121 LIPPINCOTT STREET  
CITY-ST-ZIP TORONTO, ONTARIO, CANADA M5S2P2

TITLE  
NAME  
STREET ADDRESS 156 WELLAND AVENUE  
CITY-ST-ZIP TORONTO, ONTARIO M4T2J7 CANADA

TITLE CD  
NAME STRATI, ERIC  
STREET ADDRESS 1300 NE 3 STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE  
NAME  
STREET ADDRESS 1257 N.W. 5TH STREET  
CITY-ST-ZIP BOCA RATON, FL 33486 USA

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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CITY-ST-ZIP

TITLE  
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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CELEULAR

FILED  
Jun 02, 2002 8:00 am  
Secretary of State

04-29-2002 90079 002 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)