FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

Corporation Name

DOCUMENT #

F93000005218 (3)

THE DAVID EMERY CURP.									
Principal Place of 7780 S.W. 115 MIAMI FL 3315	STREET	Mailing Address 7780 S.W. 115 STREET MIAMI FL 33156	7780 S.W. 115 STREET						
						3. Date incorporated or Qualified 11/17/1993		e of Last Rep 14/11/199	
2. Principal Plac	be of Business	2a. Mailing Address				4. FEI Number		L	oplied For
21		26				91-1486922			ot Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Z _I p	Zip Court				es No		
	9. Name and Address of Curre					10. Name and Address of New F	egistered	Agent	
				B1	Name				
SCHMACHTENBERG, ESQ , LEE C 1533 SUNSET DRIVE				82	Street Addr	ess (P.O. Box Number is Not Acceptab	ile)		
SUITE 201				83					
MIAMI FL 33143			Ì	84	City	FL 85 Zip Coo			Code
SIGNATURE _	Signature, typed or printed name of registered ag-			Ager	it signature require	d with rendating: ADDITIONS/CHANGES TO OFF	DATE	ID DIBECTO	RS IN 12
12.		IND DIRECTORS	13. 1, 1 TI	 1) F	T	ADDITIONS/OFFANGES TO OFF	<u>IOETIO 7 4 1</u>	☐ Change	Addition
TITLE	PD NOODE ID DUILD E			1.2 NAME 1.3 STREET ADDRESS					
NAME	MOORE JR, PHILIP E 7780 S.W. 115TH STREET								
STREET ADORESS	MIAMI FL		. I		ST - ZIP				
CITY-SI-ZIP TITLE	VSTD	DELETE	2 1 11					Change	Addition
NAME	MOORE, PRISCILLIA F		2.2 NA	2.2 NAME					
STREET ADDRESS	7780 S.W. 115TH STREET		2351	REEL	i address				
CITY-ST-ZIP	MIAMI FL				\$1-7 ₁ P			Change	Addition
TITLE	DELETE			3 1 TITLE 3.2 NAME			*	onlings	[] Modition
NAME									
STREET ADDRESS					ET ADDRESS				
CITY-ST-ZIP	☐ DELETE			3.4 CITY - S1 - ZIP 4 1 TITLE				Change	Addition
NAME		<u>L.</u> •	4.2 N						
STREET ADDRESS					1 ADDRESS				•
CITY-ST-ZIP			4.4 C	ΠY-	ST-ZIP				F-1
TITLE		DELETE	5 1 1	ITLE				Change	☐ Addition
NAME			52 N	AME					
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP			5.4 C	ITY-	ST-ZIP			[T] Change	☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 12 or Block 1370 hanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AT TYPED OF FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayleric Proce II

SIGNATURE AT TYPED OF FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6 1 THTLE

6.2 NAME

63 STREET ADDRESS

64 CITY - ST-ZIP

TITLE

NAME

STREET ADDRESS

DELE1E

Change Addition