2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 24, 2004 8:00 am Secretary of State DOCUMENT # F95000002363 1: Entity Name 03-24-2004 90050 038 ***158.75 EMERY FARM ESTATES LTD. CO. Principal Place of Business Mailing Address STELLAR HOUSE BARBOUR SQUARE STÉLLAR HOUSE BARBOUR SQUARE HIGH STREET TATTENHALL CHESTER CHESHIRE UK ch3- 9rf HIGH STREET TATTENHALL CHESTER CHESHIRE UK ch3- 9rf -UK-2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State Applied For 4. FEI Number 98-0058423 Not Applicable Zip Country __Zip Country \$8.75 Additional 5. Certificate of Status Desired _ - \ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DETTMAN PROPERTIES, INC. Street Address (P.O. Box Number is Not Acceptable) 2550 N FEDERAL HWY FORT LAUDERDALE FL 33305 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 .9. Election, Campaign Financing. \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 VD TITLE TITLE Change ☐ Addition Delete EMERY, LOUISE NAME NAME STREET ADDRESS STELLAR HOUSE BARBOUR SQUARE HIGH STREET STREET ADDRESS CITY-ST-ZIP CHESTER CHESHIRE UK ch3- 9rf CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE EMERY, JOSEPHINE A NAME STELLAR HOUSE BARBOUR SQUARE HIGH STREET STREET ADDRESS STREET ADDRESS CHESTER CHESHIRE UK ch3- 9rf CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NAME WADSWORTH, DAVID IAN NAME STREET ADDRESS STELLAR HOUSE BABOUR SQUARE HIGH STREET STREET ADDRESS CITY-ST-ZIP CHESTER CHESHIRE UK ch3- 9rf CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete DIRE Change Addition NAME NAME STREET ANDRESS STREET ADDRESS CITY-ST-ZIP 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 10 or Block 11 if

JOSEAHNEA. EMER

FILED