## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00.

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # H73944**

1. Corporation Name

EMERY INDUSTRIES, INC.

Principal Place of Business Mailing Address						
% DOROTHY EMERY 4601 NORTH DIXIE HIGHWAY POMPANO BEACH FL 33064	% DOROTHY EMERY 4801 NORTH DIXIE HIGHW POMPANO BEACH FL 330	 				
	المراجع	ا محادة ياست الله الم		Date Incorpora 09/03/198		
Principal Place of Business 1	2a. Mailing Address 26			FEI Number <b>59-258365</b>		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5.	Certifcate of S		
City & State	City & State		1	Election Camp		
Zip Country	Zip 29	Country 30	1	This corporati Personal Prop		

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90121 038 \*\*\*150.00



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Principal Place	e of Business			Ì						
% DOROTHY EI		% DOROTHY EMERY	v		{					
POMPANO BEA	=	4601 NORTH DIXIE HIGHWAY POMPANO BEACH FL 33064			DO NOT WRITE IN THIS SPACE					
	WII 1 2 3300 7				<u> </u>	3. Date Incorporated or Qualifed				
	we was the same same	e na na propinsi na na		مائئين يا ي		09/03/1985 -	<del>-</del>	#c	.∸ [	
2. Principal Pl	lace of Business	2a. Mailing Address				4, FEI Number			Applied For	
21		26				59-2583656		1	Not Applicable	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, et								\$8.75 Additional	
<del> </del>		27		;	5. Certifcate of Status Desired	Ш	Fee F	Required		
City & State	е	City & State			6. Election Campaign Financing		\$5.00	May Be		
23					Trust Fund Contribution		Added	d to Fees		
Zip	Country .	Zip	Country	,		8. This corporation owes the cur	ent year Int	angible	_ {	
24	25	29	30		Ĺ	Personal Property Tax.		Yes	□No	
	9. Name and Address of Current	Registered Agent			1	0. Name and Address of New	Registered A	Agent		
			81	Name		49				
	RY, DOROTHY		82	Street A	Address	(P.O. Box Number is Not Accept				
	NORTH DIXIE HIGHWAY		02	SuberA	1	A . 1 . 1 . 1				
POM	IPANO BEACH FL 33064		83		-1	70 100			}	
	•		-		Д"		<del></del> -	Tes 7:	Codo	
			84	City	J		FL	85  Zip	Code	
11 Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statute	s, the abov	e-named c	corporati	ion submits this statement for the	ourpose of	changing i	ts registered	
l office or n	egistered agent or both, in the State o	f Florida. Such change was au	thanzed by	the coroor	oration's	board of directors. I hereby acce	pt the appoir	ntment as i	registered	
,	m familiar with, and accept the obligati	ons of, Section 607.0505, Fion	ga Statute:	•						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered Age	nt signature rec	equired whe	n reinstating)	DATE		}	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECT	ORS IN 12	
TITLE	DST	☐ DELETE	1.1 TTLE					Change	e 🗋 Addition	
NAME	EMERY, DOROTHY		1.2 NAME	ł	!				]	
STREET ADDRESS	4700 NE 2ND WAY		1.3 STREE	TADORESS	1					
CITY-ST-ZIP	DOMBANO DOLLEI		1.4 CITY-S	- 1	I				ì	
TITLE			2.1 TITLE				<del></del>	Change	e Addition	
NAME .	EMERY, LOREN R.		2.2 NAME			-			. ]	
STREET ADDRESS	4700 NE 2ND WAY		3	TADDRESS					Ì	
i i	POMPANO BCH FL									
TITLE			2. 4 CITY-ST-ZIP 3.1 TITLE					Change	e	
1 1	EMERY, MARK S.	<u> </u>	3.2 NAME	]						
ATOO NE OND WAY		•		TADDRESS					}	
STREET ADORESS	DOMESTIC CONT.		3.4. CITY-						.	
CITY-ST-ZIP			4.1 TITLE	31-EIF				Change	e Addition	
TITLE		T"I PETEIC	4.1 IIILE							
NAME	*			ľ	ì				}	
STREET ADDRESS			4	TADDRESS						
CITY-ST-ZIP	/ October		4.4 CITY-S	11-ZIP				☐ Change	e Addition	
TITLE	• •	□ DELETE	5.1 TITLE 5.2 NAME							
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STREET ADDRESS	Spring Section 1			TADDRESS						
CITY-ST-ZIP.,			5.4 CITY-S	11-2119	<u> </u>			Char	 B ☐ Addition	
TITLE "		☐ DELETE	6.1 TITLE					☐ Change	, LAGORON	
NAME			8.2 NAME						}	
STREET ADDRESS			6.3 STREE	TADDRESS		c				

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with arraddress, with all other like empowered.

DOROTA G OFFICER OR DIRECTO