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Jan 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J12452

(5)

1. Corporation Name

EMR CONSTRUCTION, INC.

Principal Place of Business

P.O. BOX 66
SHARPE FL 32859

Mailing Address

P.O. BOX 66
SHARPE FL 32859-0066

3. Date Incorporated or Qualified
05/02/1986

3a. Date of Last Report
07/06/1996

2. Principal Place of Business

21 282 Capron Fl

2a. Mailing Address

26 Suite, Apt #, etc.

22 Cocoa Fl

27 Suite, Apt #, etc.

23 City & State

28 City & State

24 Zip

29 Zip

25 Country

30 Country

26 Country

31 Country

9. Name and Address of Current Registered Agent

EMR, GEORGE A.
282 CAPRON ROAD
COCOA FL 32927

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

George A. Emr Pres

Signature typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/15/97

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

PV
EMR, GEORGE A.
282 CAPRON ROAD
COCOA FL

DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

ST
EMR, GEORGE A.
282 CAPRON ROAD
COCOA FL

DELETE

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TITLE NAME STREET ADDRESS CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY - ST - ZIP

8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY - ST - ZIP

9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY - ST - ZIP

10.1 TITLE 10.2 NAME 10.3 STREET ADDRESS 10.4 CITY - ST - ZIP

11.1 TITLE 11.2 NAME 11.3 STREET ADDRESS 11.4 CITY - ST - ZIP

12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY - ST - ZIP

13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP

14.1 TITLE 14.2 NAME 14.3 STREET ADDRESS 14.4 CITY - ST - ZIP

15.1 TITLE 15.2 NAME 15.3 STREET ADDRESS 15.4 CITY - ST - ZIP

16.1 TITLE 16.2 NAME 16.3 STREET ADDRESS 16.4 CITY - ST - ZIP

17.1 TITLE 17.2 NAME 17.3 STREET ADDRESS 17.4 CITY - ST - ZIP

18.1 TITLE 18.2 NAME 18.3 STREET ADDRESS 18.4 CITY - ST - ZIP

19.1 TITLE 19.2 NAME 19.3 STREET ADDRESS 19.4 CITY - ST - ZIP

20.1 TITLE 20.2 NAME 20.3 STREET ADDRESS 20.4 CITY - ST - ZIP

21.1 TITLE 21.2 NAME 21.3 STREET ADDRESS 21.4 CITY - ST - ZIP

22.1 TITLE 22.2 NAME 22.3 STREET ADDRESS 22.4 CITY - ST - ZIP

23.1 TITLE 23.2 NAME 23.3 STREET ADDRESS 23.4 CITY - ST - ZIP

24.1 TITLE 24.2 NAME 24.3 STREET ADDRESS 24.4 CITY - ST - ZIP

25.1 TITLE 25.2 NAME 25.3 STREET ADDRESS 25.4 CITY - ST - ZIP

26.1 TITLE 26.2 NAME 26.3 STREET ADDRESS 26.4 CITY - ST - ZIP

27.1 TITLE 27.2 NAME 27.3 STREET ADDRESS 27.4 CITY - ST - ZIP

28.1 TITLE 28.2 NAME 28.3 STREET ADDRESS 28.4 CITY - ST - ZIP

29.1 TITLE 29.2 NAME 29.3 STREET ADDRESS 29.4 CITY - ST - ZIP

30.1 TITLE 30.2 NAME 30.3 STREET ADDRESS 30.4 CITY - ST - ZIP

31.1 TITLE 31.2 NAME 31.3 STREET ADDRESS 31.4 CITY - ST - ZIP

32.1 TITLE 32.2 NAME 32.3 STREET ADDRESS 32.4 CITY - ST - ZIP

33.1 TITLE 33.2 NAME 33.3 STREET ADDRESS 33.4 CITY - ST - ZIP

34.1 TITLE 34.2 NAME 34.3 STREET ADDRESS 34.4 CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)