FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

FILED
97 MAY 13 AM 9:18
SECRETARY OF STATE
[redacted]

DOCUMENT # J70537 (2)

1. Corporation Name
EMILU CORPORATION

Principal Place of Business	Mailing Address
% LOURDES E GONZALEZ 9945 SW 49 ST MIAMI,FL 33165	% LOURDES E. GONZALEZ 9945 SW 49 ST MIAMI, FL 33165

3. Date Incorporated or Qualified: 04/29/1987
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-2794837 — Applied For / Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) Country (25)	Zip (29) Country (30)

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LOURDES, GONZALEZ E.
9945 SW 49 ST
MIAMI, FL 33165

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 [illegible] DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	GONZALEZ, LOURDES E.	
STREET ADDRESS	9945 SW 49 ST	
CITY-ST-ZIP	MIAMI, FL 33165	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME	000002181980--0	
1.3 STREET ADDRESS	-05/16/97--01123--006	
1.4 CITY-ST-ZIP	****165.00 ****165.00	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. [illegible] the information supplied with this filing [illegible] and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. [illegible] 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 [illegible] of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes [illegible] changed, or [illegible] with an address [illegible]

SIGNATURE: Lourdes González Lourdes González 4-28-96 [illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — TELEPHONE
Lourdes González Lourdes E. Gonzalez 4-17-97 898-0472