

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90163 028 ***150.00

DOCUMENT # J87210

1. Entity Name

EMO CORPORATE SERVICES, INC.

Principal Place of Business

% LEE W. HARVATH, JR.
 100 N.E. THIRD AVE., SUITE 1100
 FT. LAUDERDALE FL 33301

Mailing Address

% LEE W. HARVATH, JR.
 100 N.E. THIRD AVE., SUITE 1100
 FT. LAUDERDALE FL 33301

2. Principal Place of Business

C/O Gerald W. Gritter
 Suite, Apt. #, etc.

3. Mailing Address

C/O Gerald W. Gritter
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

65-0003600

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ENGLISH, MCCAUGHAN & O'BRYAN, P.A.
100 N.E. THIRD AVE.
SUITE 1100
FT. LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PTD** ☒ Delete
 NAME **HARVATH, LEE W., JR.**
 STREET ADDRESS **4130 NE 25TH AVE**
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **VPS** ☐ Delete
 NAME **GRITTER, GERALD W.**
 STREET ADDRESS **5416 N.E. 21 TERR.**
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **AS** ☒ Delete
 NAME **HUNTER, PATRICE A**
 STREET ADDRESS **731 N.E. 47 COURT**
 CITY-ST-ZIP **OAKLAND PARK FL**

TITLE **AS** ☐ Delete
 NAME **CHRYSTIE, DEBRA H**
 STREET ADDRESS **9861 N ABAICA CIRCLE**
 CITY-ST-ZIP **DAVIE FL 33328**

TITLE **AS** ☐ Delete
 NAME **EMAS, MARSHALL J**
 STREET ADDRESS **100 NE 3RD AVE #1100**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE **VP** ☒ Delete
 NAME **KEISER, JUDITH L**
 STREET ADDRESS **100 NE 3RD AVENUE 31100**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VP** ☐ Change ☒ Addition
 NAME **WILLIAM COLEMAN**
 STREET ADDRESS **100 N.E. 3 Avenue, Suite 1100**
 CITY-ST-ZIP **Fort Lauderdale, FL 33301**

TITLE **D/P/T/S** ☐ Change ☐ Addition

TITLE **AS** ☐ Change ☒ Addition
 NAME **Jennifer Weinbach**
 STREET ADDRESS **100 N.E. 3 Avenue, Suite 1100**
 CITY-ST-ZIP **ft. lauderdale, FL 33301**

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE **AS** ☐ Change ☒ Addition
 NAME **Patricia Donahoe**
 STREET ADDRESS **100 N.E. 3 Avenue, Suite 1100**
 CITY-ST-ZIP **ft. lauderdale, FL 33301**

13. 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)