2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K21500

Entity Name: EMERALD POINTE OF HOLLYWOOD, INC.

FILED Jan 06, 2009 Secretary of State

Littly Nai	HE. LIVILRALL	FOINTE OF HOLLTWOOL	, INC.					
Current Principal Place of Business:				New Principal Place of Business:				
	RALD POINTE DOD, FL 33021							
Current Mailing Address:				New Mailing Address:				
1903 HARRISON STREET SUITE 505 HOLLYWOOD, FL 33020 US				1930 HARRISON STREET SUITE 505 HOLLYWOOD, FL 33020 US				
FEI Number:	65-0045691	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certific	ate of Status D	esired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
SUITE 505	RISON STREE							
	named entity s of Florida.	ubmits this statement for the	purpose o	of changing i	ts registered	office or	registered ag	gent, or both,
SIGNATUR								
Fl4: 0	Electroni	Date						
Election Can	npaign Financing	Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	BERMAN, HOW	STREET, SUITE 505		Title: Name: Address: City-St-Zip:	(() Change	() Addition	
Title: Name: Address: City-St-Zip:	DST () WEIL, MICHAEL 3541 NORTH 41 HOLLYWOOD, F	TERRACE		Title: Name: Address: City-St-Zip:	()Change	() Addition	
Title: Name: Address: City-St-Zip:	ACKERMAN, MA	RY CLUB DRIVE		Title: Name: Address: City-St-Zip:	ACKERMAN,	MARCOS COUNTRY	() Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: STEVE BERMAN DV 01/06/2009

DV () Delete

1930 HARRISON STREET, SUITE 505

BERMAN, STEVEN B

City-St-Zip: HOLLYWOOD, FL 33020

Title:

Name:

Address:

() Change () Addition