2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jun 11, 2007 8:00 am Secretary of State

DOCUMENT # L0700001829 1. Entity Name EMERALDS INTERNATIONAL, LLC								7 90150 005 *	****50.00
Principal Place	of Business	<u> </u>	Mailing Address			1	_		
104 DUVAL S KEY WEST, FL			104 DUVAL STREET KEY WEST, FL 33040					n Calif Baist Josi (Env Jrv	:= (1)100 ti (60)
2. Principal Pl	lace of Busin	ess - No P.O. Box #	3. Malling Address						
Suite, Apt. #, etc.			Suite. Apt. #, etc.			03132007	Chg-LLC	CR2E083 (12/0	96)
City & State			City & State			4. FEI Number 20 -	840-175	50	Applied For Not Applicable
ΖΊρ		Country	Zip	Coun	lry	5. Certificate	of Status Desired	□ \$5.00. Fee Requ	Additional uired
	and Address of Current	t Registered Agent		Name	7. Name and	Address of New R	egistered Agent		
MARCIAL, MARINA 104 DUVAL STREET KEY WEST, FL 33040			Street		Street Address (P.O. Box Number	er is Not Acceptable)	
les.					Cit				\
					City		To the State of Sta	FL Zip C	
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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signatur/Model's printing name of registered agent and site if applicable. (NOTE: Registered Agent signature required when rematating) CATE									
Filing Fee is \$50.00 Due by May 1, 2007								e check payable to Department of S	
9.		MANAGING MEMB		10.		<u>.</u> <u>.</u>	ADDITIONS /		
TITLE NAME	MGR MARCIAL, INGE		C Delete TITLE					☐ Chan	ge 🗌 Addition
STREET ADDRESS	TREET ADDRESS 104 DUVAL STREET TY-ST-ZIP KEY WEST, FL 33040				et address - St-Zip				
TITLE	MGR		☐ Delete	TITE		 - <u></u>		☐ Chan	ge 🔲 Addition
NAME	MARCIAL, MANUEL J			NAM	E ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	104 DUVAL STREET KEY WEST, FL 33040			CITY					
TITLE NAME	MGR Delete MARCIAL, MARINA		☐ Delets	TITLE NAME		-		☐ Chan	ge 🗌 Addition
STREET ADDRESS					ZZARODA TE				Į
CITY-S1-ZIP	KEY WES	ST, FL 33040		CITY ITTL	-ST-ZIP			CT 01	
NAME	<u></u>	-	Delete	NAV	E			الهنين المستحد مس	ge 🕞 Addition -
STREET ADDRESS CITY-ST-ZIP					ET ADORESS - ST-ZIP				
TITLE		·	Delete	TIFL		· · · · · · · · · · · · · · · · · · ·	 :	Chan	pe Addition
NAME STREET ADDRESS				MAN STR	E ET ADDRESS				
CITY-ST-ZIP				CITY	-ST-ZIP				
TITLE HAME	—		TITL HAM	1			Chan	ge 🗌 Addition	
STREET ADORESS CITY-ST-ZIP					EET ACORESS 1-ST-ZIP				j
	certify that the comparability	ne information supplied wort is true and accurate an	ith this filing does not qualify to not that my signature shall beve tee empowered to execute this	r the exe the sam report a	emptions contained e legal effect as if r s required by Chap	in Chapter 119, made under oatf oter 608, Florida	Florida Statutes. I for that I am a manag Statutes.	urther certify that the ging member or man	information ager of the
SIGNATURE: MMMMMM 59.07									