

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L80763

(0)

1. Corporation Name
EMD ASSOCIATES, INC.

Principal Place of Business

200 S. BISCAYNE BLVD.
20TH FL.
MIAMI FL 33131
US

Mailing Address

200 S. BISCAYNE BLVD.
20TH FL.
MIAMI FL 33131-2310
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

LEWIS, EDGAR
200 S. BISCAYNE BLVD.
20TH FL.
MIAMI FL 33131

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

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

(NOTE: Registered Agent's signature required when reinstating)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LEWIS, EDGAR
200 S. BISCAYNE BLVD, 20TH FL.
MIAMI FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DRINKHOUSE, MICHAEL
1255 SE 11TH AVE.
OCALA FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

14. I do 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 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; 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 12 or Block 13 if changing, or on an attachment with an address.

FILED
May 06 1997 8:00am
Secretary of State



3. Date Incorporated or Qualified 06/14/1990	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0339059	Applied For Not Applicable
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	
10. Name and Address of New Registered Agent	

CR2E034 (9/96)