

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # M37737

1. Entity Name
EMJ MANAGEMENT CORP.



Principal Place of Business

**2400 SW 24TH TERR
MIAMI, FL 33145**

Mailing Address

**2400 SW 24TH TERR
MIAMI, FL 33145**



01252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FCI Number
59-2735161

Added For
Not Added

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**VALDES, EDUARDO J.
2400 SW 24TH TERR
MIAMI, FL 33145**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature of person making change of registered office and the registered agent, or both, or the registered agent signing on behalf of the entity.

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U00000525616
05/04/06-80040-023-150.00**

10. OFFICERS AND DIRECTORS

**TITLE PD
NAME VALDES, EDUARDO J.
STREET ADDRESS 2400 SW 24TH TERR
CITY ST ZIP MIAMI, FL**

**TITLE STD
NAME VALDES, AMERICO
STREET ADDRESS 2400 SW 24TH TERR
CITY ST ZIP MIAMI, FL**

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

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**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Eduardo J. Valdes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/06

305-226-2086

DATE

PHONE NUMBER