

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

FILED

Apr 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # M38717 (8)  
1. Corporation Name  
EMERALDS INTERNATIONAL, INC.

Principal Place of Business Mailing Address  
104 DUVAL ST. 104 DUVAL ST.  
KEY WEST FL 33040 KEY WEST FL 33040-6508



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		09/18/1986	04/25/1996
22 City & State		27 City & State		4. FEI Number	Applied For
23 Zip		28 Zip		99-0192070	Not Applicable
24 Country		29 Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
				6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

MARCIAL, INGE  
104 DUVAL STREET  
KEY WEST FL 33040

10. Name and Address of New Registered Agent

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 type 30, printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	Executive Vice President
NAME	MARCIAL, INGE	1.2 NAME	Marcial, Inge
STREET ADDRESS	718 DUVAL STREET	1.3 STREET ADDRESS	104 Duval Street
CITY - ST - ZIP	KEY WEST FL	1.4 CITY - ST - ZIP	Key West, FL 33040
TITLE	President	2.1 TITLE	
NAME	Manuel J. Marcial	2.2 NAME	
STREET ADDRESS	104 Duval St	2.3 STREET ADDRESS	
CITY - ST - ZIP	Key West, FL 33040	2.4 CITY - ST - ZIP	
TITLE	Vice President	3.1 TITLE	
NAME	Martina Marcial	3.2 NAME	
STREET ADDRESS	104 Duval St	3.3 STREET ADDRESS	
CITY - ST - ZIP	Key West, FL 33040	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 officer 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 changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President April 23, '97 (305) 274-2060

Date

Daytime Phone #

0138631

CR2E034 (9/96)