

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011923

FILED  
May 02, 2006  
Secretary of State

Entity Name: EMUE CORP.

**Current Principal Place of Business:**

2606 ARCADIA DRIVE  
MIRAMAR, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 245126  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

FEI Number: 20-2033450      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

A1A REGISTERED AGENT INC.  
92 SADBERRY ROAD  
QUINCY, FL 32351      US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: PETIT-FRERE, ALDRING  
Address: 2606 ARCADIA DRIVE  
City-St-Zip: MIRAMAR, FL 33023

Title: D      ( ) Delete  
Name: PETIT-FRERE, MARILYN  
Address: 2606 ARCADIA DRIVE  
City-St-Zip: MIRAMAR, FL 33023

Title: D      ( ) Delete  
Name: BERNARD, MARIE  
Address: 1120 NW 131 STREET  
City-St-Zip: MIAMI, FL 33168

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARILYN PETIT-FRERE

D

05/02/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date