

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000036603

FILED
Apr 07, 2004
Secretary of State

Entity Name: EMLYNNE, INC.

Current Principal Place of Business:

4803 SW 119TH AVE.
COOPER CITY, FL 33330

New Principal Place of Business:

Current Mailing Address:

4803 SW 119TH AVE.
COOPER CITY, FL 33330

New Mailing Address:

FEI Number: 65-1108612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RASMUSSEN, LINDA L
4803 SW 119TH AVE.
COOPER CITY, FL 33330

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: RASMUSSEN, LINDA L
Address: 4803 SW 119TH AVE.
City-St-Zip: COOPER CITY, FL 33330

Title: VP () Delete
Name: VALEZ, STEPHANIE D
Address: 11648 SW 59 ST.
City-St-Zip: COOPER CITY, FL 33330

Title: D () Delete
Name: RASMUSSEN, DOUGLAS E
Address: 4803 SW 119 AVE
City-St-Zip: COOPER CITY, FL 33330

Title: SEC () Delete
Name: WOODS, CHERYL L
Address: 4111 STIRLING RD #405
City-St-Zip: FORT LAUDERDALE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SOVERNS, STEPHANIE D
Address: 4803 SW 119 AVE
City-St-Zip: COOPER CITY, FL 33330

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

Title: SEC (X) Change () Addition
Name: WOODS, CHERYL L
Address: 4803 SW 119 AVE
City-St-Zip: COOPER CITY, FL 33330

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS E RASMUSSEN

D

04/07/2004

Electronic Signature of Signing Officer or Director

_____ Date