

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000063681

FILED  
Jun 30, 2005  
Secretary of State

Entity Name: EMESEME ENTERPRISES, CORP.

## Current Principal Place of Business:

16919 NORTH BAY RD., #1018  
SUNNY ISLES BEACH, FL 33160

## New Principal Place of Business:

16919 NORTH BAY RD., #1018  
SUNNY ISLES BEACH, FL 33160

## Current Mailing Address:

16919 NORTH BAY RD., #1018  
SUNNY ISLES BEACH, FL 33160

## New Mailing Address:

16919 NORTH BAY RD., #1018  
SUNNY ISLES BEACH, FL 33160

FEI Number: 65-1117528

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUINTERO, SYLVIA  
801 BRICKELL AVE 9TH FLOOR  
MIAMI, FL 33180 US

## 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SZARF, MOISES  
Address: 21205 NE 37 AVE #3107  
City-St-Zip: AVENTURA, FL 33180

Title: V ( ) Delete  
Name: VILLAROEL, EDGARDO  
Address: 21205 NE 37 AVE #3107  
City-St-Zip: AVENTURA, FL 33180

Title: ST ( ) Delete  
Name: JINKUS, DIEGO  
Address: 21205 NE 37 AVE #3107  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SZARF, MOISES  
Address: 16919 N BAY ROAD #1018  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: V (X) Change ( ) Addition  
Name: VILLAROEL, EDGARDO  
Address: 16919 N BAY ROAD #1018  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: ST (X) Change ( ) Addition  
Name: JINKUS, DIEGO  
Address: 16919 N BAY ROAD #1018  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: MOISES SZARF

PD

06/30/2005

Electronic Signature of Signing Officer or Director

Date