

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000076835

Entity Name: E MARKETING SERVICES, INC.

FILED  
May 21, 2008  
Secretary of State

## Current Principal Place of Business:

5200 NORTH FEDERAL HIGHWAY  
SUITE 2-1231  
FORT LAUDERDALE, FL 33308

## New Principal Place of Business:

2400 NW 62ND STREET  
SUITE 200  
FORT LAUDERDALE, FL 33309

## Current Mailing Address:

5200 NORTH FEDERAL HIGHWAY  
SUITE 2-1231  
FORT LAUDERDALE, FL 33308

## New Mailing Address:

2400 NW 62ND STREET  
SUITE 200  
FORT LAUDERDALE, FL 33309

FEI Number: 65-1126787

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAMERMAN, HALE M  
5200 N FEDERAL HWY #2-1231  
FORT LAUDERDALE, FL 33308 US

## Name and Address of New Registered Agent:

CAMERMAN, HALE M  
2400 NW 62ND STREET  
SUITE 200  
FORT LAUDERDALE, FL 33309 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: HALE M. CAMERMAN

05/21/2008

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: PSTD ( ) Delete  
Name: CAMERMAN, HALE M  
Address: 5200 NORTH FEDERAL HIGHWAY SUITE 2-1231  
City-St-Zip: FORT LAUDERDALE, FL 33308

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: CAMERMAN, HALE M  
Address: 2400 NW 62ND STREET, SUITE 200  
City-St-Zip: FORT LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HALE M. CAMERMAN

PSTD

05/21/2008

Electronic Signature of Signing Officer or Director

Date