

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90352 009 ***150.00

DOCUMENT # P01000084974

1. Entity Name
EM-GIN MANUFACTURING, INC.

Principal Place of Business
416 WESLEY DRIVE
TARPON SPRINGS FL 34689

Mailing Address
416 WESLEY DRIVE
TARPON SPRINGS FL 34689



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
720 WESLEY AVE
 Suite, Apt. #, etc.

3. Mailing Address
720 WESLEY AVE Box #8
 Suite, Apt. #, etc.

City & State
TARPON SPRINGS FL
 Zip
34689
 Country
Pinellas

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TARPON SPRINGS FL
 Zip
34689
 Country
Pinellas

4. FEI Number
72-1520571
 Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GONZALES, LARRY J
2655 MCCORMICK DRIVE
CLEARWATER FL 33759

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

I, 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GINNIS, EMANUEL 716 WESLEY DRIVE TARPON SPRINGS FL 34689	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (4/02)

13. I 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 report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE Emanuel N. Ginnis **REQUIRED** Emanuel N. Ginnis 7/16/02 (727) 942-3868
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment (R)
Po/000084974
120593



MANUFACTURING, INC.
720 WESLEY AVE
TARPON SPRINGS, FL 34689
PH. 727-942-3868 FAX 727-942-6723

—JULY 9, 2002—

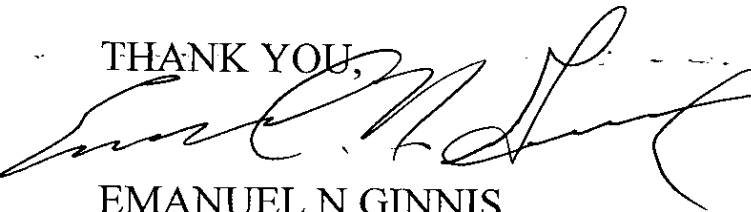
TO WHOM IT MAY CONCERN:

I AM WRITING TO NOTIFY THE DIVISION OF CORPORATIONS THAT THE ADDRESS THAT IS ON RECORD FOR EM-GIN MANUFACTURING INC. IS INCORRECT. THE CORRECT ADDRESS IS AS FOLLOWS:

EM-GIN MANUFACTURING INC.
720 WESLEY AVE. BOX #8
TARPON SPRINGS, FL. 34689

PLEASE ADDRESS ALL FUTURE CORRESPONDENCE TO THIS ADDRESS.

THANK YOU,



EMANUEL N GINNIS