

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000089275

1. Entity Name
EMERALD TOWER REALTY, INC.



Principal Place of Business
**120 E OAKLAND PARK BLVD, SUITE 105-84
OAKLAND PARK, FL 33334**

Mailing Address
**120 E OAKLAND PARK BLVD, SUITE 105-84
OAKLAND PARK, FL 33334**



02162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1134862

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**WEINSTEIN, LEONID
120 E OAKLAND PARK BLVD, SUITE 105-84
OAKLAND PARK, FL 33334**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity subr 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 _____

(Printed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when restate(s))

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **WEINSTEIN, LEONID**
STREET ADDRESS **120 E OAKLAND PARK BLVD, SUITE 105-84**
CITY-ST-ZIP **OAKLAND PARK, FL 33334**

TITLE
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1000000470991
03/28/06-80036-003 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with my address, with an other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT 3/12/06 (954)815-7174

Date

Daytime Phone #