

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000065701

1. Entity Name
EMERALD RESOURCES, INC.



Principal Place of Business
**4633 SW 28TH WAY
FORT LAUDERDALE, FL 33312**

Mailing Address
**4633 SW 28TH WAY
FORT LAUDERDALE, FL 33312**

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90345 048 ***150.00

60028947



04142006 No Chg-P CR2E034 (11/05)

4. FEI Number
52-2366341

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**JIMENEZ, EDNA M
4633 SW 28TH WAY
FORT LAUDERDALE, FL 33312**

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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	JIMENEZ, EDNA M
STREET ADDRESS	4633 SW 28TH WAY
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312
TITLE	PVST
NAME	JIMENEZ, EDNA M
STREET ADDRESS	4633 SW 28TH WAY
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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 an address, with all other like empowered.

SIGNATURE: Edna Jimenez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/06

Date

Daytime Phone #