

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108859

FILED  
Sep 30, 2004  
Secretary of State

Entity Name: EMIT HOMES, INC.

## Current Principal Place of Business:

911 NW 69 STREET  
SUITE G  
MIAMI, FL 33150

## New Principal Place of Business:

6130 NW 59 COURT  
SUITE B  
MIAMI, FL 33127

## Current Mailing Address:

P.O. BOX 170357  
HIALEAH, FL 33017-035

## New Mailing Address:

FEI Number: 76-0755245

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EXECUTIVE MANAGEMENT CONSULTANTS, INC.  
1900 COMMERCIAL BLVD.  
SUITE 153  
FT LAUDERDALE, FL 33309

## Name and Address of New Registered Agent:

EXECUTIVE MANAGEMENT CONSULTANTS, INC.  
6130 NW 7TH AVENUE  
SUITE B  
MIAMI, FL 33127

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: EXECUTIVE MANAGEMENT CONSULTANTS, INC

09/30/2004

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: D ( ) Delete  
Name: CONLEY, OSSIE M  
Address: 911 NW 69 STREET  
City-St-Zip: MIAMI, FL 33150

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DUNBAR, CARLIE  
Address: 6130 NW 7 AVENUE  
City-St-Zip: MIAMI, FL 33127 US

Title: VPD ( ) Change (X) Addition  
Name: WILLIAMS, DEVON  
Address: 6130 NW 7 AVENUE  
City-St-Zip: MIAMI, FL 33127 US

Title: STD ( ) Change (X) Addition  
Name: JAVARIS, CARRION  
Address: 6130 NW 7 AVENUE  
City-St-Zip: MIAMI, FL 33127

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: EXECUTIVE MANAGEMENT CONSULTANTS, INC

VP

09/30/2004

Electronic Signature of Signing Officer or Director

Date