

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 19, 2007 8:00 am
Secretary of State

01-25-2007 90049 047 ***158.75

DOCUMENT # P04000016330

1. Entity Name
EM CONSTRUCTION & DEVELOPMENT GROUP, CORP.



Principal Place of Business

**1591 SOUTH WEST 124TH CONCOURSE PLANE
MIAMI, FL 33184**

Mailing Address

**1591 SOUTH WEST 124TH CONCOURSE PLANE
MIAMI, FL 33184**

66001948



01102007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0604935

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HERNANDEZ, ZAIDA
1591 SOUTH WEST 124TH CONCOURSE PLANE
MIAMI, FL 33184**

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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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
HERNANDEZ, ZAIDA
1591 SOUTH WEST 124TH CONCOURSE PLANE
MIAMI, FL 33184**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VTD
HERNANDEZ, ZAIDA
1591 SOUTH WEST 124TH CONCOURSE PLANE
MIAMI, FL 33184**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
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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 a power of attorney.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

02/12/07

Date

Daytime Phone #