2008 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT # P04000016330** 01-28-2008 90038 019 ***150.00 1. Entity Name EM CONSTRUCTION & DEVELOPMENT GROUP, CORP. 40011020 Principal Place of Business Mailing Address 1591 SOUTH WEST 124TH CONCOURSE PLANE 1591 SOUTH WEST 124TH CONCOURSE PLANE MIAMI, FL 33184 MIAMI, FL 33184 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01212008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 20-0604935 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent okeno HERNANDEZ, ZAIDA Street Address (P.O. Box Number is No Acce 1591 SOUTH WEST 124TH CONCOURSE PLANE MIAMI, FL 33184 patement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this the obligations of registered agen SIGNATURE. Signature, typed or printed name registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. **PSD** TITLE ☐ Belete HILE HERNANDEZ, ZAIDA NAME STREET ADDRESS 1591 SOUTH WEST 124TH CONCOURSE PLANE STREET ADDRESS CITY-ST-7IP CITY-ST-70 MIAMI, FL 33184 VTD Delete TITLE TITLE HERNANDEZ, ZAIDA NAME NAME STREET ADDRESS 1591 SOUTH WEST 124TH CONCOURSE PLANE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33184 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDIRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby 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 supplementation eport 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 transport of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

all other like empowered.

OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with

SIGNATURE AND

SIGNATURE: _

FILED Jan 28, 2008 8:00 am

Davtimo Phone #