2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 19, 2007
Secretary of State

DOCUMENT# P04000124091

Entity Name: EMMSEE CORPORATION

Current Principal Place of Business:

2234 NW 62ND AVENUE
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

2234 NW 62ND AVENUE
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 20-2137217 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARELLEK, STEVEN
700 SOUTH FEDERAL HWY STE 200
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SCHULTE, ANDRYA
Address: 2234 NW 62ND AVENUE
City-St-Zip: BOCA RATON, FL 33496

Title: VPD ( ) Delete
Name: SCHULTE, CHRISTIAN
Address: 2234 NW 62ND AVENUE
City-St-Zip: BOCA RATON, FL 33496

Title: S ( ) Delete
Name: SOLOMON, CHRISTY
Address: 9784 GRAND VERDE WAY #605
City-St-Zip: BOCA RATON, FL 33428

Title: T ( ) Delete
Name: CUNNINGHAM, ROBERT
Address: 2234 NW 62ND AVENUE
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ANDRYA SCHULTE MRS. 08/19/2007

Electronic Signature of Signing Officer or Director — Date