

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90389 003 ***150.00

DOCUMENT # P05000024647 1. Entity Name EMME SEA PROPERTIES, INC.					
Principal Place of Business 1361 NE 103 OST MIAMI, FL 33168			Mailing Address 1361 NE 103 OST MIAMI, FL 33168		
2. Principal Place of Business - No P.O. Box # 1361 NE 103 ST.		3. Mailing Address 1361 NE 103 ST.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State MIAMI, FL.		City & State MIAMI, FL.		4. FEI Number 20-2350380	
Zip 33138		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33138		Country		04172007 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent LOWENSTEIN, ELLIOT 2100 SALZEDO STREET SUITE 303 CORAL GABLES, FL 33134				7. Name and Address of New Registered Agent Name CORDOVA, ANGEL D. Street Address (P.O. Box Number is Not Acceptable) 780 NW 42 AVE. #416 City MIAMI, FL. FL Zip Code 33126	
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 X		ANGEL D. CORDOVA		04/16/07	
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. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, MARTA CECILIA 1361 NE 103 ST MIAMI, FL 33168		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: X MARTA C. RODRIGUEZ, PRES. 4/16/07.					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					