

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000038536

Entity Name: EMAE SERVICES, INC.

FILED  
Nov 02, 2006  
Secretary of State

## Current Principal Place of Business:

P.O.BOX 729  
LARGO, FL 33779

## New Principal Place of Business:

## Current Mailing Address:

P.O.BOX 729  
LARGO, FL 33779

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SAMUEL, EARNELL A JR.  
P.O.BOX 729  
LARGO, FL 33779 US

## Name and Address of New Registered Agent:

SAMUEL, EARNELL A JR.  
1329 CHESTERFIELD DR  
CLEARWATER, FL 33756 US

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: SAMUEL EARNELL

11/02/2006

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: DP ( ) Delete  
Name: SAMUEL, EARNELL A JR.  
Address: 1329 CHESTERFIELD DR  
City-St-Zip: CLEARWATER, FL 33756

Title: D ( ) Delete  
Name: SAMUEL, EARNELL A  
Address: 1329 CHESTERFIELD DR  
City-St-Zip: CLEARWATER, FL 33756

Title: D ( ) Delete  
Name: SAMUEL, MARQUIS J  
Address: 1329 CHESTERFIELD DR  
City-St-Zip: CLEARWATER, FL 33756

Title: D ( ) Delete  
Name: SAMUEL, ARNISA A  
Address: 1329 CHESTERFIELD DR  
City-St-Zip: CLEARWATER, FL 33756

Title: D ( ) Delete  
Name: SAMUEL, EARION L  
Address: 1329 CHESTERFIELD DR  
City-St-Zip: CLEARWATER, FL 33756

## 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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: EARNELL SAMUEL

DP

11/02/2006

Electronic Signature of Signing Officer or Director

Date