2008 FOR PROFIT CORPORATION **FILED** ANNUAL REPORT Jan 09, 2008 08:00 AN **DOCUMENT # P05000103943** Secretary of State 1. Entity Name EMERIVEST, INC. Principal Place of Business Mailing Address 3880 SHERIDAN STREET 3880 SHERIDAN STREET HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021 US CR2E034 (11/05) 01062008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 20-3210449 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE HILL, OLIN M 3880 SHERIDAN STREET HOLLYWOOD, FL 33021 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 profed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 2 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME HILL, OLIN M 3880 SHERIDAN STREET STREET ADDRESS

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CITY-ST-ZIP OF CONCRETE CONTROL CONTRO	22 (r. 2051)
-12. I hereby certify that the information supplied with this filing does not qualify for the exe	mptions contained in Chapter 119, Florida Statutes. I further certify that the information ure 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 effect this report as require	ed 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:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE NAME

TITLE
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HOLLYWOOD, FL 33021

SIGNATURE AND TWEE OR PRINTED MAKE OF SIGNING OFFICER OR DESCRIPT

1/7/08

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