2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000109846

1. Entity Name
EMJ CONSULTING INC



FILED Mar 03, 2008 08:00 A Secretary of State

Principal Place of Business

2575 GERBER DAIRY RD WINTER HAVEN, FL 33880 Mailing Address

2575 GERBER DAIRY RD WINTER HAVEN, FL 33880



DO NOT WRITE IN THIS SPACE

02282008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-4356085 Applied For
Not Applicable

5. Certificate of Status Desired Fee Required
Fee Required

6. Name and Address of Current Registered Agent

changed, or on an attackment with an address, with all other like empowered.

WRIGHT, DEBRA S 2575 GERBER DAIRY RD WINTER HAVEN, FL 33880

DO NOT WRITE IN THIS SPACE

2/28/08 863-293-4/19

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 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, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.		scing \$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS		which the district the factor of
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WRIGHT, DEBRA S 2575 GERBER DAIRY RD WINTER HAVEN, FL 33880			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				000000844339 % 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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				