

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000167592

FILED
Jan 25, 2008
Secretary of State**Entity Name:** EMERALD MANAGEMENT SERVICES, INC.**Current Principal Place of Business:**6495 SHILOH ROAD
SUITE 400
ALPHARETTA, GA 30005 US**New Principal Place of Business:**8210 SOLANO BAY LOOP
TAMPA, FL 33635 US**Current Mailing Address:**6495 SHILOH ROAD
SUITE 400
ALPHARETTA, GA 30005 US**New Mailing Address:**3517 WENNINGTON TRACE
ALPHARETTA, GA 30004 US**FEI Number:** 20-4264266**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DUBOVOY, ARKADIY PVP
13846 ATLANTIC BLVD.
APT. 905
JACKSONVILLE, FL 32225 US**Name and Address of New Registered Agent:**LENCHUK, MARINA PVP
13846 ATLANTIC BLVD
JACKSONVILLE, FL 32225 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: MARINA LENCHUK

01/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PVP () Delete
Name: DUBOVOY, IGOR
Address: 6495 SHILOH ROAD SUITE 400
City-St-Zip: ALPHARETTA, GA 30005 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PVP (X) Change () Addition
Name: LENCHUK, MARINA
Address: 3517 WENNINGTON TRACE
City-St-Zip: ALPHARETTA, GA 30004 US

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: MARINA LENCHUK

PVP

01/25/2008

Electronic Signature of Signing Officer or Director

Date