

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000101406

Entity Name: E.M.C.B. INC.

FILED
Feb 29, 2008
Secretary of State

Current Principal Place of Business:

17720 NW 72 AVE
UNIT 105-2
HIALEAH, FL 33015

New Principal Place of Business:

Current Mailing Address:

17720 NW 72 AVE
UNIT 105-2
HIALEAH, FL 33015

New Mailing Address:

FEI Number: 13-4358232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, MARY
17720 NW 72 AVE
UNIT 105-2
HIALEAH, FL 33015 US

Name and Address of New Registered Agent:

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: FRAZER JOHNSON

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: PS () Delete
Name: BROWN, MARY
Address: 17720 NW 72 AVE - UNIT 105-2
City-St-Zip: HIALEAH, FL 33015

Title: VP () Delete
Name: BROWN, ELSON
Address: 17720 NW 72 AVE - UNIT 105-2
City-St-Zip: HIALEAH, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ELSON BROWN

P

02/29/2008

Electronic Signature of Signing Officer or Director

Date