

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000007477

Entity Name: EMOTEN, INC.

**FILED**  
**Feb 13, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

40 SW SEDONA CIR, APT 201  
STUART, FL 34994

## **New Principal Place of Business:**

55 SE PALERMO CT. UNIT #202  
STUART, FL 34994

## **Current Mailing Address:**

40 SW SEDONA CIR, APT 201  
STUART, FL 34994

## **New Mailing Address:**

55 SE PALERMO CT. UNIT #202  
STUART, FL 34994

FEI Number: 38-3749743

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

VALLIERE, JAMES  
79 S. RIVER RD.  
STUART, FL 34996 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: D  
Name: VALLIERE, JONATHAN J  
Address: 79 S. RIVER RD.  
City-St-Zip: STUART, FL 34996

I hereby 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 all other like empowered.

SIGNATURE: JONATHAN VALLIERE

D

02/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date