

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000055068

FILED  
Apr 30, 2010  
Secretary of State

Entity Name: EMMA 2511, INC,

**Current Principal Place of Business:**

2121 PONCE DE LEON BLVD  
SUITE 1050  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

2121 PONCE DE LEON BLVD  
SUITE 1050  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

FEI Number: 27-0435893      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CONSULTING SERVICES OF SOUTH FLORIDA, INC.  
2121 PONCE DE LEON BLVD  
STE 1050  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

ANDERSON CASTRO, P.A.  
1000 BRICKELL AVENUE  
STE 335  
MIAMI, FL 33131 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: ANDERSON CASTRO      04/30/2010  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HALSALL, GRAHAM  
Address: 3RD FLOOR, WEST WING TST CENTRE, MODY RD T  
City-St-Zip: KOWLOON, HONG KONG, HK 00285 HK

Title: SD  
Name: HALSALL, EMMA  
Address: 3RD FLOOR, WEST WINGTST CENTRE, MODY RD T  
City-St-Zip: KOWLOON, HONG KONG, HK 00285 HK

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: GRAHAM HALSALL      PRES      04/30/2010  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date