

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000103983

Entity Name: EMARKET BOOST, INC.

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

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

2194 STACIL CIRCLE  
NAPLES, FL 34109

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

1200 GOODLETTE-FRANK RD. N.  
12163  
NAPLES, FL 34102

## **Current Mailing Address:**

2194 STACIL CIRCLE  
NAPLES, FL 34109

## **New Mailing Address:**

1200 GOODLETTE-FRANK RD. N.  
12163  
NAPLES, FL 34102

FEI Number: 45-3986079

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GATRI, LINDA  
2194 STACIL CIRCLE  
NAPLES, FL 34109 US

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

GATRI, LINDA  
1200 GOODLETTE-FRANK RD. N.  
12163  
NAPLES, FL 34102 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: LINDA GATRI

02/10/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PRES  
Name: GATRI, LINDA  
Address: 2194 STACIL CIRCLE  
City-St-Zip: NAPLES, FL 34109

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: LINDA GATRI

PRES

02/10/2012

Electronic Signature of Signing Officer or Director

Date