FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 21 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000022995 (2) EMERALD INTERIORS, INC.

| | 10 110 110 | 181 Sec | | | | |
|---|--|---|--|---|--|---|
| Principal Place of Business 3000 N OCEAN DRIVE SUITE 96-F SINGER ISLAND FL 33404 | | Mailing Address 3000 N OCEAN DRIVE SUITE 36-F SINGER ISLAND FL 33404-3250 | | | | |
| | | | | | 3. Date Incorporated or Qualified 03/21/1994 | 3a. Date of Last Report 09/19/1996 |
| 2. Principal Place of Business 21 | | 2a. Mailing Address 26 | | 4. FEI Number 65-04824()4 | Applied For Not Applicable | |
| Suffe, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | S8.75 Additional Fee Required | |
| City & State | | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip 24 | Country 25 | Zip 29 | Coun | try | 8. This corporation has liability for in Florida Statutes | ntangible tax under s. 199.032, Yes No |
| | 9, Name and Address of Currer | nt Registered Agent | | | 10. Name and Address of New Reg | istered Agent |
| CIR | CO, JUDY | |] { | Name | | |
| 3000 N OCEAN DRIVE SUITE 36-F | | | 8 | 32 Street Add | ress (P.O. Box Number is Not Acceptable | e) |
| | GER ISLAND FL 33404 | | | 33 | | |
| | | | 8 | City | | FL 85 Zip Code |
| 11. Pursuant office or r agent 1 a | to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig | 2 and 607,1508, Florida Stat of Florida. Such change was ations of, Section 607,0505, | utes, the abo s authorized Florida Statu | ove-named corpora by the corpora tes. | poration submits this statement for the patient's board of directors. I hereby accep | roose of changing its registered |
| SIGNATURE | | | _ | | | |
| | Signature, typed or printed name of registered age | | | Agont signature requi | red when reinstaling) | DATE |
| 12. | OFFICERS AN | D DIRECTORS DELETE | 13. | - 1 | ADDITIONS/CHANGES TO OFFICE | RS AND DIRECTORS IN 12 Change |
| TITLE NAME | CIRCO, JUDY | L. Ottett | 1.1 Title 1.2 NAM | - 1 | | Change Lt Addition |
| STREET ADDRESS | 3000 N OCEAN DRIVE #36-F | | | EET ADDRESS | | <u>;</u> |
| CITY-ST-ZIP | SINGER ISLAND FL 33404 | | | -ST-ZIP | | |
| TITLE | | | 21 1/1 | | | Change Addition |
| NAME | | _ | 2.2 NAV | | | |
| STREET ADDRESS | | | • | EET ADDRESS | | |
| CITY-ST-ZIP | | | | Y-ST-ZIP | | |
| TITLE | | ☐ DELE1E | 3.1 TITU | | | Change Addition |
| NAME | | | 3.2 NAM | E | | |
| STREET ADDRESS | | | 3 3 STRI | EET ADDRESS | | <u> </u> |
| CITY-ST-ZIP | , | | 3.4. CITY | r-st-zip | | |
| TITLE | | ☐ DELETE | 4.1 TITL | E | | Change D Addition |
| NAME | | | 4. 2 NAN | ME . | | |
| STREET ADDRESS | | | 4.3 \$TRE | ET ADDRESS | | |
| CITY-ST-ZIP | | , | 4.4 CITY | | | |
| TITLE | | DELETE 5.1 | | | , | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAM | • | | 14/1 |
| STREET ADDRESS | | | 5 3 STRE | ET ADDRESS | | 1\psi/\psi/\psi |
| CITY-ST-ZIP | | | | -ST-ZIP | | |
| TITLE | | ☐ DELETÉ | 6.1 TITLE | | 50000220 -06/05/970100 | 225 hange D Addition |
| NAME) | | | 6.2 NAM | - 1 | -06/05/970100 | 3008 |
| STREET ADDRESS | • | | 6.3 STRE | ET ADDRESS | ***165.80 | |

***165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.