FILED Aug 05, 2008 8:00 am Secretary of State 04-17-2008 90014 017 ***150.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000079888 1. Eruity Name EMCAM, INC.			
	Cress T French ave City, FL 32763	66015763	
DO NOT WRITE IN THIS SPACE		02022008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For Not Applicable 59-3280238 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BLACKWELL, T.G. 235 WEST FRENCH AVE ORANGE CITY, FL 32763		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or gifted registrog often and title if applicable. UNDTE: Registered Agent agreed when reintesting)			
FILE NOWITH FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May 8e Added to Fees			
10. OFFICERS AND DIRECTORS IITLE PO HAMAE HAWA, WILSON STREET AUDRESS 235 W. FRENCH AVE CITY-ST-ZP ORANGE CITY, FL 32763 IITLE NAME STREET AUDRESS CITY-ST-ZP			
TITLE INJACE STREET ADDRESS CITY-ST-20PTITLE		DO NOT WRITE IN THIS SPACE	
HAME STRIET ADDRESS CITY-SI-70*			
RAME STREET ADDRESS CITY-ST-ZIP			
NAME STREET ADDRESS CITY-ST-2P 2			
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 gineture small have the same tegal effect as if made under certify that I em officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes: and thet my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PHINTED HAME AND STATES OF CHARGE OF CHAR			

T.G. BLACKWELL • C.P.A.

A Professional Association

Florida Institute of C.P.A.s

ATTACHMENT

American Institute of C.P.A.s

66015763_{uly 30, 2008}

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Re: Emcam, Inc

Ref. Number P94000079888

This is in response to your letter of 4/28/08, copy attached.

The signature line was inadvertently omitted from Line 12 and was entered on Line 8. Enclosed is the corrected Annual Report form with signature on the proper line.

Please consider our good faith effort to comply with the filing requirements documented by timely fling and payment for this and past years reports. We believe this is a reasonable cause for forgiveness of the late filing penalty resulting from our unintentional placement of the signature on the wrong line.

Your assistance is greatly appreciated and we apologize for the inconvenience this may have caused.

Very truly yours,

T/G./Blackwell

Certified Public Accountant

TGB/sln

CC: Emcam, Inc.