2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000028380

1. Entity Name

EMERALD PLAZA DEVELOPMENT, INC.



FILED Jan 14, 2008 08:00 AM Secretary of State

Principal Place of Business

925 N COURTENAY PKWY

28

MERRITT ISLAND, FL 32953

Mailing Address

P 0 BOX 320219

COCOA BEACH, FL 32932



No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3308306 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NOHRR, PHILIP F 1800 W. HIBISCUS BLVD STE 138 MELBOURNE, FL 32902-187

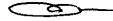
DO NOT WRITE IN THIS SPACE

MELBOUR	RNE, FL 32902-1870		IN	THIS	SPACE	
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or registered agent, or	both, in the State	of Florida. I am famil	liar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registere	d Agent signature required when reinstating)	. 1	DATE	
FIL After Ma	E NOWI!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.				
10.	OFFICERS AND DIREC	CTORS .	[中华] 经保险证明	温泉分割的		最高的 11.16.16.16.17.17.17.17.17.17.17.17.17.17.17.17.17.
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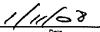
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



Daytime Phone #