2005 FOR PROFIT CORPORATION ANNUAL REPORT

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

FILED Jul 25, 2005 08:00 AM Secretary of State

ANNUAL REPORT			Jul 25, 2005 08:00 A			
OCUMENT # P95000044250 Entity Name EM AMERICA COMPANY, INC.				Sec	retary of	State
	nailing Address					
	5768 PENDLEBURY CT PT ORANGE, FL 32127					
Tronnoc, 12 32127_	1 1 010 8402,12 32727		1 1891/2011		ur maiir Afair Albin (faile affi	BE)(BE) 11 1381
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DO NOT WRITE I	CE	07062005	No Chg-P	CR2E034 (10/03	Applied For	
			59-333			Not Applicable
			5. Certificate	of Status Desired	□ \$8.75 A	
6. Name and Address of Current Regi	stered Agent		L			
CORPORATION SERVICE COMPANY		,	no	NOT W	DITE	
1201 HAYS STREET						
TALLAHASSEE, FL 32301-2525			IN .	THIS SF	PACE	
8. The above named entity submits this statement for the	purpose of changing its registere	d office or register	ed agent, or bo	oth, in the State of Fl	orida. I am familiar wi	h, and accept
the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required			d when relastating) DATE			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Final Trust Fund Contribution.		scing \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRE	CTORS			<u> </u>		
TITLE DP						
NAME KATO, CHIAKI STREET ADDRESS 5768 PENDLEBURY CT				1000000 nz/25/ns-	374442 80010-004 11	cn on
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STREET ADDRESS						
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 of 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: LILL OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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