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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #	P95000054847
Corporation Name	. 0000000 .0

EMERALD HILLS VENTURES, INC.

Principal Place of Business

Mailing Address

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90136 041 ***150.00



929 CLINT MOORE ROAD BOCA RATON FL 33487 BOCA RATON FL 33487					
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualifed 07/17/1995	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0058262	Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22 27				5. Certificate of Status Desired	Fee Required
City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip Country		8. This corporation owes the current year Intangible	
24	25	29 30		Personal Property Tax.	
	9. Name and Address of Current	Registered Agent	04 11	10. Name and Address of New Registered	
C-ALD/	AVERS, JOE		81 Name	HOWARD KOSLOW NO	MAN Taplin
			82 Street	Address (P.O. Box Number is Not Agceptable)	
929 CHINT MOORE ROAD			575	- North Hagler Drive,	aute 1600
800	A-RATON-FL 33487		83 0	29 Clint Moore No	crol - a
			84 City	West Palm Beach FI	85 Zip 5313 401
44 Diversions	Atha are deligne of Sections 607 DE03	and 507 1508 Elorida Statutes	the afternment	corporation submits this statement for the purpose of	f changing its registered
office or n	edistered agent, or both, in the State o	f Florida. Such change was auth	orized by the corpo	corporation submits this statement for the purpose o pration's board of directors. I hereby accept the apport	intment as registered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	a Statutes.	.3-1	7-99
SIGNATURE		100	V =	3-1 ⁻	
	Stonature, typed or printed name of registered agent OFFICERS AND		stered Agent signature r	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
12.	D . OFFICERS AND	DELETE	1,1 TITLE	ADDITIONS OF PAGE 10 OF TOERO	Change Addition
	TAPLIN, NORMAN E		1.2 NAME		/ "
NAME		900	1.3 STREET ADDRESS	Grand Hacle Drwe, Su	ste 1600
STREET ADDRESS	250 ROYAL PALM WAY, SUITE	300		515 North Hogler Drwe, Su West Palm Meach, H- 334	vn/
Crty-St-ZiP	PALM BEACH FL 33480	☐ DELETE	1.4 CITY+ST-ZIP 2.1 TITLE	Wes V rum Pauce, 11- 351	☐ Change ☐ Addition
TITLE	P	betait		·	
NAME .	BARANOFF, PETER		2.2 NAME		
STREET ADDRESS	929 CLINT MOORE ROAD		2.3 STREET ADDRESS	★ ·	
OTTY OT ZIP	BOCA RATON FL 33487	₽ DELETE	2.4 CITY-ST-ZIP	Continue	Change Addition
TITLE	S	DELETE	3.1 TITLE	Secretary	Actual de -
NAME	STRAVERS, JOE		3.2 NAME	MONDED MOSTON	Pana
STREET ADDRESS	929 CLINT MOORE ROAD		3.3 STREET ADDRESS	7 LY BIN CLINI MORE	32/167
CITY-ST-ZIP	BOCA RATON FL 33487		3.4. CITY-ST-ZIP	Secretary HOWARD KOSTOW 929 GHN CLINT MOORE BOCK RATON 71	J 240 /
TITLE	VP .	☐ DELETE	4.1 TITLE		Change Addition
NAME	KOSLOW, HOWARD		4. 2 NAME		
STREET ADDRESS	929 CLINT MOORE ROAD		4.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33487		4.4 CITY-ST-ZIP		
TITLE	• •	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	,		5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	to a troub trace of		6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14 hereby c	certify that the information supplied with	this filing does not qualify for th	e exemption stated	in Section 119.07(3)(i), Florida Statutes. I further ce	ertify 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 preciper 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 with all other like empowered.