


FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

102

DOCUMENT # P95000092766	
1. Entity Name Emery's Erection & Dismantling Inc	

FILED

03 FEB 27 PM 12:00

CLERK OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2033 Crowley Cir W		3. Mailing Address PO Box 916429	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Longwood FL	City & State Longwood FL	4. FEI Number 59-3349320	
Zip 32779	Country	Zip 32798-6429	Country

2002-2003 UBR

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Jeffery C Emery	
	Street Address (P.O. Box Number is Not Acceptable) 2033 Crowley Cir W	
	City Longwood	FL Zip Code 32779

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 _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Jeffery C Emery 2033 Crowley Cir W Longwood, FL 32779	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800013632278 03/06/03--01060--003 **\$300.00
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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)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Date _____ Daytime Phone # _____

CR2E034B (12/02)

Attachment

Emerys Erection and Dismantling, Inc.

P95000092760

P.O. Box 916429
Longwood, FL 32791-6429

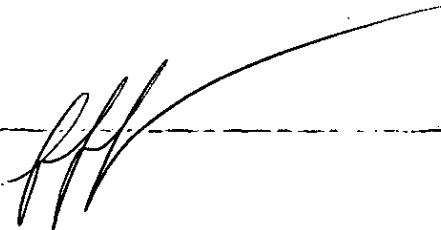
222

Phone 407-804-9787
Fax 407-804-1433

This letter is to notify you that we never received our reject letter At this time we would request that you reinstate our corporation.

Thank You

Jeffery Emery

A handwritten signature in black ink, appearing to read 'JEFFERY EMERY', is written over a horizontal line.