## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## P96000018198 **DOCUMENT #**

1. Entity Name

EMERALD POINTE DEVELOPMENT CORP.

SIGNATURE: Yash Pal Kakkar, Secretary



FILED

03 FEB 14 PM 4: 50

Date 561) 627-7988 Sytime Phone #

						<b>'</b>	SECKETARY DESTAT	· E ·		
Principal Place of Business C/O CREATIVE CHOICE HOMES 4243-D NORTHLAKE BLVD. PALM BEACH GARDENS FL 33410			Mailing Address C/O Creative Choice Homes 4243-D Northlake BLVD. PALM BEACH GARDENS FL 33410				SECKETARY OF STAT TALLAHASSEELFEORI			
2. Principal F	Place of Busin	ness	3. Mailing Address							
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKIN	IG CHANGES		
City & State			City & State			4. f	FEI Number 65-0793046	<u> </u>	oplied For	
Zip Country			Zip	itry	5. (	Certificate of Status Desired	\$8.75 Add	ditional d		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
			Name							
BAROT, D	ILIP		Chronical		Ctoo to Address	. /D.O. D	Secretaria de la Maria de la Companya de la Maria dela Maria dela Maria dela Maria de la Maria dela Mar			
4243 NORTHLAKE BLVD STE D					Street Address (P.O. Box Number is Not Acceptable)					
PALM BEACH GARDENS FL 33410									*	
THE DESCRIPTION OF WATER										
					City	City FL Zip Code				
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										
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							9. Election Campaign Financing Trust Fund Contribution.		May Be to Fees	
10.		OFFICERS AND D	DIRECTORS	11.		AD	DITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS	S IN 11	
TITLE	TDP		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME	BAROT, DILIP				E					
STREET ADDRESS				STRE	ET ADDRESS		<i>t</i> h			
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410				-ST-ZIP	- ( $/$	' $L$ $K$		ļ	
TITLE	SVP		☐ Delete	TITLE		7	7/\	☐ Change	☐ Addition	
NAME	WEIR, JOHN F			NAM						
STREET ADDRESS	4243 NORTHLAKE BLVD STE D			STRE	ET ADDRESS		•			
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410			CITY	-ST-ZIP					
TITLE	VP		Delete	TITLE				☐ Change	☐ Addition	
NAME	WHEAT, TI		<i>&gt;</i>	NAM	E		9000132758	359		
STREET ADDRESS		THLAKE BLVD STE D	•	STRE	ET ADDRESS		9000132758 02/28/0301057023	**158.7	5	
CITY-ST-ZIP	PALM BEA	CH GARDENS FL 33410	)	CITY	-ST-ZIP			,	-	
TITLE	S		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME	Kakkar, 1		`.	NAM	:					
STREET ADDRESS		THLAKE BLVD STE D		STRE	ET ADDRESS					
CITY-ST-ZIP	PALM BEA	CH GARDENS FL 33410	)	CITY	-ST-ZIP					
TITLE			☐ Delete	TITLE	: [			☐ Change	Addition	
NAME				NAM						
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CITY#ST-ZIP		, <u>,</u>	·	CITY	·ST-ZIP					
TITLE		•	☐ Delete	TITLE	ĺ			☐ Change	Addition	
NAME				NAME						
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP					ST-ZIP					
12. I hereby certify that the information supplied with this filing does not guality 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 his 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 ampowered.										