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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000062342 (6)

THE EMERALD REALTY GROUP, INC.

Principal Place	e of Business	Mailing Address		i isrifant iin ialia siiki sairi selii obii	I ONEIN MISUR SURAN SINIK NISSA 1FAF 17AF
1660 PRUDENTIA JACKSONVILLE		1680 PRUDENTIAL DRIVE #203 JACKSONVILLE FL 32207-8185			
				3. Date Incorporated or Qualified 07/25/1996	3a. Date of Last Report
	lace of Business	2a. Mailing Address		4, FEI Number	Applied For
21 8843	SAN JOSE BLVD.	P.O. BOX 47	7276	59-3396316	Not Applicable
Suite, Apt 22 SUITE		Suite Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 JACKS	ONVILLE, FLORIDA	28 JACKSONVILLE		Trust Fund Contribution	Added to Fees
<sup>Ζφ</sup> 32217	Country U.S.A.	<sup>/φ</sup> 32247 3	Country U.S.A.		Yes No
	9. Name and Address of Curren	Registered Agent		10. Name and Address of New Re	egistered Agent
GAR	TNER, W A		81 Name		•
1660 PRUDENTIAL DRIVE #203 JACKSONVILLE FL 32207			82 Street Address (P.O. Box Number is Not Acceptable)		
0.10	, , , , , , , , , , , , , , , , , , , ,		83		
			84 City		85 Zip Code
			G4 City		FL S 2 P CODE
often or n	to the provisions of Sections 607,0502 egistered agent, or both, in the State mifanciar with, and accept the obliga	of Florida. Such change was at	thorized by the corr	corporation submits this statement for the poration's board of directors. I hereby acce	ourpose of changing its registered pt the appointment as registered
SIGNATURE.	Signature its leafur pointed name of near 500 duration	AICT	61		274
12.	OFFICERS AND		Hagistored Agent's gnature	ADDITIONS/CHANGES TO OFFI	DATE TERS AND DIRECTORS IN 12
1111.6	D	DELETE	1,1 THILE	ASSITIONS/GIT/INGES TO CITT	Change Addition
NAME	SAOUD, EDMOND R		1,2 NAME		-
STREET ADDRESS	1660 PRUDENTIAL DRIVE #203		1.3 STREET ADDRESS		
C TY - ST - ZIP	JACKSONVILLE FL 32207		1.4 CITY - ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAVE			2.2 NAME		
STREET ADDRESS			23 STREET ADDRESS		Ì
C(1 y - S1 - 7#P			2 4 CITY - ST - ZIP		
TIFLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		•
STREET ADDRESS			3 3 STREET ADDRESS		•
CITY - \$1 - 709			3 4. CITY-ST-ZIP		
10108		☐ DELET€	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
City-St-7-2			4.4 CITY - ST - ZIP		
THE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZiF		——————————————————————————————————————	5.4 CITY - ST - ZIP		
THILE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

SIGNATURE:

14. I do hereby certly that the information supplied with this fill information indicated or this amoust report or supplement I am a officer or director of the corporation or the results appears in Block 12 or Block 13 if changed, or on an appear.

NATURE AND TYPED OR THE TALL OF SIGNING OFFICER OR DIRECTOR

EDMOND R. SAOUD 1/20/97 (904)737-8846

the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the accurate and that my signature shall have the same legal effect as if made under oath; that execute this report as required by Chapter 607, Florida Statutes; and that my name

**FILED** 

Jan 27 1997 8:00am

Secretary of State

0031965

CR2E034 (9