2001 UNIFORM BUSINESS REPORT (UBR)

Jun 19, 2001 8:00 am Secretary of State DOCUMENT # P96000076364 06-19-2001 90007 011 ***150.00 EMERALD ADVISORS, INC. Principal Place of Business Mailing Address 306 GRAND KEY TERRACE 306 GRAND KEY TERRACE PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0695620 Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MULLEN, ARNOLD Street Address (P.O. Box Number is Not Acceptable) -1601 FORUM PLACE, SUITE 905 WEST PALM BEACH FL 33401 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Additio TITLE Change Delete TITLE MULLEN, EDWARD NAME NAME STREET ADDRESS 306 GRAND KEY TERRACE STREET ADDRESS CITY-S1-ZIP PALM BEACH GARDENS FL 33418 CITY-ST-ZIP IIILE ☐ Delete THILE Change Additic MULLEN, SHIRLEY NAME NAME 306 GRAND KEY TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33418 [] Change Additi TITLE ☐ Delete TITLE NAMI NAME STHELF ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP D Delete ☐ Change Additi NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addit HILE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP HILE ☐ Delete Change Addi Addi TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 informatio 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 direct 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 11 or Block 1 chapter of the corporation of the receiver of the response of the corporation of the receiver of the response of the corporation of the receiver of the response of the response

changed, or on an attachment with an address, with all other like empowered.

FILED

Attachment Of MGOUSING AUUTSM

Emerald Advisors, Inc. 306 Grand Key Terrace Palm Beach Gardens, Florida 33418

June 6, 2001

Florida Department of State
Division of Corporations
Attn: Reinstatement Department
P:O: Box-6327

Tallahassee, Florida 32314

Re: Emerald Advisors, Inc.

65-0695620

Ladies or Gentlemen:

Enclosed is a copy of our 2001 Uniform Business Report, along with our replacement check in the amount of \$150.00. The original return and check were filed March 12, 2001.

We noticed that our original check to you was not enclosed with either our April or May bank statement, and we called your office. We were told to send a copy of the original report, along with a replacement check and this letter requesting we not be assessed an additional fee.

We respectfully request that the enclosed copy of the original report and the replacement check be accepted, and that we not be assessed any additional costs since we did attempt in good faith to file this report on a timely basis.

Thank you for your consideration.

Sincerely,

Edward Mullen

Edward Mullen