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

FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000015200

1. Corporation Name
Emerald Empire, Inc.

Principal Place of Business
345 N. Haverhill Rd
K-14
West Palm Beach, FL 33415

Mailing Address
Same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
2-17-97

2. Principal Place of Business
21
Suite Apt #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite Apt #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number
65-0729178
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

AmeriLawyer
343 Almeria AVE
Coral Gables, FL 33134

10. Name and Address of New Registered Agent

81 Name Judith Gentile
82 Street Address (P.O. Box Number is Not Acceptable) 345 N. Haverhill Rd
83 K-14
84 City WPB FL 85 Zip Code 33415

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Judith Gentile 4-1-98
Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Judith Gentile 345 N Haverhill Rd K-14 WPB FL 33415	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	P Barry Roth 345 N Haverhill Rd K-14 WPB FL 33415	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	VP Karim Clinton Gentile 345 N Haverhill Rd K-14 WPB FL 33415	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	S ADAM Gentile 345 N. Haverhill Rd K14 WPB FL 33415	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	T Anthony Gentile 345 N. Haverhill Rd K-14 WPB FL 33415	☐ Change ☒ Addition 4/7
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	600002482038 -04/08/98--01014--014 ***150.00	☐ Change ☐ Addition

14. 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 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 receiver 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.

SIGNATURE: Judith Gentile CEO 3/19/98 561-681-9997
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JUDITH GENTILE 561-863-3434
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #

CR2E034 (10/97)