FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jun 26, 2001 8:00 am DOCUMENT # P9700035005 **Secretary of State** 06-26-2001 90394 050 ***158.75 ESTHETIQUES & MUSCLE THERAPY NETWORK, INC. Principal Place of Business Mailing Address 1821 MIDDLE RIVER DR 1821 MIDDLE RIVER DR STE 15 STE 15 FT. LAUDERDALE FL 33305 FT. LAUDERDALE FL 33305 2. Principal Place of Business 3. Mailing Address 861<u>: EAST</u> EVANSTON CIRCLE 861 RAST EVANSTON CIRCLE Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0757378 FORT LAUDERDALE FLORIDA FORT LAUDERDALE Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired US A 333*12*. Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MIGUEL DIAS, MIGUEL S Street Address (P.O. Box Number is Not Acceptable) 1821 MIDDLE RIVER DR **STE 15** EVANSTON CIRCLE FT. LAUDERDALE FL 33305 LAUDERMLE 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. MIGUEL SDIAS 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. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change Addition TITLE ☐ Delete TITLE PRESIDENT DIAS, MIGUEL S NAME NAME DIAS, MIGUEL S 1821 MIDDLE RIVER DR STE 15 STREET ADDRESS STREET ADDRESS 861 EAST EVANSTON CIACLE FT. LAUDERDALE FL 33305 CITY-ST-ZIP CITY-ST-ZIP FORT LAUSERBALE FLORIDA 33312 BOARD OF DIRECTOR TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME DR. GIL ERIKSEN STREET ADDRESS STREET ADDRESS 349 5.E. 18TH COURT CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALF, FLORIDA 33316 BOARD OF DIRECTOR Addition TITLE Delete TITLE NAME TIM A SHANE NAME 2255 GLADES ROAD Suite 236W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON 33431 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

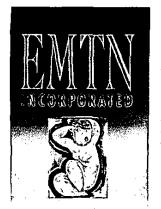
08/25/01

954-316-9994

☐ Change

Addition

Daytime Phone #



June 21, 2001

Division Of Corporations P.O. Box 1500 Tallahassee, FL. 32302-1500

Attachment
DD:# 1997000035005
BOUS9333

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Attention: To Uniform Business Report Filings

I am writing this letter to you to inform you that just last week we have received in the mailed our Company 2001 Uniform Business Report paper work to be filed. Do to our change of business address it was lost in the mailed. Do to the events that took place we are only able to file the report just now.

We appreciate your consideration regarding us filing the report now and still paying the \$150.00 dues that are required to file it before May 1, 2001.

If you may need any further information please from us please contact us at (954) 316-9994.

Our Best Regards:

Antonio Pyull

Antonio Miguel Dias

President

EMTN Inc.