2005.FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 02; 2005 08:00 AM Secretary of State

DOCUMENT # P97000103547 1. Entity Name EMS REAL ESTATE, INC.				Secretary of State			
28059 US H SUITE 101	WY 19 N	Adling Address 28059 US HWY 19 N SUITE 101 CLEARWATER, FL 33761			1 1840 - 18 40 - 18 40 - 184 0 - 18 40 - 184 0 - 184 0 - 1840	E/ 880/ E0/00 (NE/ DIS DIS DIS NE/DE/ DID	
C	OO NOT WRITE I	CE	01252005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For 59-3488590 Not Applied be Sa.75 Additional Fee Required				
401 S. LIN	6. Name and Address of Current Regi E, WILLIAM K ESQ. COLN AVE_ ATER, FL 33756	stered Agent			NOT W THIS SF		
8. The above the obligat SIGNATURE	named entity submits this statement for the tions of registered agent. Signature, typed or printed name of registered agent and title		ed affice or register	· ·	th, in the State of Flo	rida. I am familiar with, and accept	
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		.00 May Be ed to Fees			
10. INTLE NAME STREET ADDRESS CITY ST ZIP THEE NAME	PD SLOSBERG, EARL M 28059 US HWY 19 N SUITE 101 CLEARWATER, FL 33761 VP DENIS, ANDREW M	CTORS			U00000 02/02/05-	210087 80065-019 150.00	
STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP	28059 US HWY 19 N SUITE 101 CLEARWATER, FL 33761	· · ·			NOT W		
TITLE NAME STREET ADDRESS CITY ST ZIP TITLE NAME STREET ADDRESS		·		IN ⁻	THIS SF	PACE	
CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				_			
12. Thereby of indicated of the corchanged,	certify that the information supplied with this I on this report or supplemental report is true poration or the receiver or trustee empowere or on an attachment with an address, with a	iting does not qualify for the exer and accurate and that my signat of to execute this report as requir If other like empowered.	nption stated in Se ure shall have the s red by Chapler 607	ction 119.07(3)(same legal effec , Florida Statute	T), Florida Statutes 1 at as if made under ones; and that my name	further certify that the information eath; that I am an officer or director appears in Block 10 or Block 11 if	

NP EMS 1/28/05 727.723.3600
REAL ESTATE / Date Dayline Phone 8

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _