

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

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Mar 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000104337 (5)

1. Corporation Name

EMERGING MARKETS ADVISORY GROUP, CORP.



Principal Place of Business 19495 BISCAYNE BLVD. SUITE 705 AVENTURA FL 33180	Mailing Address 19495 BISCAYNE BLVD. SUITE 705 AVENTURA FL 33180
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3530 Mystic Pointe Dr. Suite, Apt. #, etc. 22 Unit # 2213 City & State 23 Aventura, FL Zip 24 33180 Country 25 USA	2a. Mailing Address 26 3530 Mystic Pointe Dr. Suite, Apt. #, etc. 27 Unit # 2213 City & State 28 Aventura, FL Zip 29 33180 Country 30 USA	3. Date Incorporated or Qualified 12/11/1997 4. FEI Number 65-0804692 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent SEGAL, YANIV 19495 BISCAYNE BLVD. SUITE 705 AVENTURA FL 33180	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 3530 Mystic Pointe Dr., # 2213 83 84 City Aventura FL 85 Zip Code 33180
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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 \_\_\_\_\_ (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 SEGAL, YANIV 19495 BISCAYNE BLVD. SUITE 705 AVENTURA FL 33180	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 3530 Mystic Pointe Dr., # 2213 Aventura, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP D SEGAL, DANA 19495 BISCAYNE BLVD. SUITE 705 AVENTURA FL 33180	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3530 Mystic Pointe Dr., # 2213 Aventura, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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:  YANIV SEGAL 03-02-98 (205) 9319188

CR2E034 (10/97)