

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000104337**

1. Entity Name

EMERGING MARKETS ADVISORY GROUP, CORP.**FILED**
Sep 15, 2002 8:00 am
Secretary of State

09-15-2002 90088 009 ***150.00

0069187 AV

Principal Place of Business

3530 MYSTIC POINTE DR
UNIT 2213
AVENTURA FL 33180
US

Mailing Address

19495 BISCAYNE BLVD.
SUITE 705
AVENTURA FL 33180

980592



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-0804692**Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****SEGAL, YANIV**
3500 MYSTIC POINTE DR
#2213
AVENTURA FL 33180**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE
NAME☐ Delete
D
SEGAL, YANIV
3530 MYSTIC POINTE DR #2213
AVENTURA FL 33180TITLE
NAME☐ Change ☐ AdditionSTREET ADDRESS
CITY-ST-ZIPSTREET ADDRESS
CITY-ST-ZIPTITLE
NAME☐ Delete
D
SEGAL, DANA
3530 MYSTIC POINTE DR #2213
AVENTURA FL 33180TITLE
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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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Leon Egozi, P.A.

Certified Public Accountant

19495 Biscayne Boulevard, Suite 705
Aventura, Florida 33180

Phone: (305) 937-2664
Fax: (305) 937-0128

September 9, 2002

Uniform Business Report
Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

P97000104337

Re: Emerging Markets Advisory Group
EIN: 65-0804692

Dear Sir/ Madam:

Included please find the corporation annual report for the above referenced taxpayer along with a check for \$150.00.

Please be advised that the majority stockholder was out of the country and could not file the annual report.

Please process the report and abate the late penalty. If you have any questions, I can be reached at 305-937-2664.

Sincerely,


Leon Egozi, CPA

Enclosures

cc:\ Yaniv Segal