

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000005990

1. Corporation Name
EMARKETING ASSOCIATES, INC.

Principal Place of Business
6904 SW 37 ST
HOLLYWOOD FL 33023

Mailing Address
6904 SW 37 ST
HOLLYWOOD FL 33023

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90055 014 ***150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 17731 SW 18th Street Suite, Apt. #, etc.		2a. Mailing Address 26 17731 SW 18th Street Suite, Apt. #, etc.		3. Date Incorporated or Qualified 01/20/1998	
22 City & State 23 Hollywood Florida		27 City & State 28 Hollywood Florida		4. FEI Number 65-0907540	
24 Zip 33029		29 Zip 33029		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 Country USA		30 Country USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
MURPHY, XAVIER
6904 SW 37 ST
HOLLYWOOD FL 33023

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
17731 SW 18th Street
83
84 City Hollywood FL 85 Zip Code 33029

11. Pursuant to the provisions of Sections 807.0502 and 807.1508, 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 807.0505, Florida Statutes.

SIGNATURE Xavier Murphy DATE _____
Signature, typed or printed name of registered agent and, if applicable, (SEE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Xavier D. Murphy 17731 SW 18th Street Hollywood, Florida, 33029	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	CIS Michael Kon 1031 NE 166 Street North Miami, Florida 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Operations Manager Karen Lee-Murphy 17731 SW 18th Street Hollywood, Florida 33029
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, with all other like empowered.

SIGNATURE: Xavier Murphy 4/28/99 (854) 428-7150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)