2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000079063

Entity Name: EMERE G CORP.

FILED May 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1823 VILLAGE BLVD. 1823 POLO LAKES DRIVE EAST

WEST PALM BEACH, FL 33414 WELLINGTON, FL 33414

Current Mailing Address: New Mailing Address:

3099 NW 48 AVE. 11913 TANTON LANE APT 154 CHARLOTTE, NC 28273

APT 154 CHARLOTTE, NC 282 FORT LAUDERDALE, FL 33313

FEI Number: 65-0878027 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GLAVE, ERIC C
3099 NW 48 AVE. #154
FORT LAUDERDALE, FL 33313 US
GLAVE, ROSALPINA
1823 POLO LAKES DRIVE EAST
WELLINGTON, FL 33414 US

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.

SIGNATURE: ROSALPINA GLAVE 05/24/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC () Delete Title: PC (X) Change () Addition

Name: GLAVE, ROSALPINA Name: GLAVE, ROSALPINA
Address: 1401 VILLAGE BLVD Address: 1823 POLO LAKES DRIVE EAST

City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: WEST PALM BEACH, FL 33414

Title: T () Delete Title: T (X) Change () Addition Name: GLAVE, MARIA I Name: GLAVE, MARIA I

 Address:
 2901 ROCK ISLAND RD. #106
 Address:
 11913 TANTON LANE

 City-St-Zip:
 MARGATE, FL 33063
 City-St-Zip:
 CHARLOTTE, NC 28273

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 GLAVE, ERIC C SR
 Name:
 GLAVE, ERIC C SR

 Address:
 3099 NW 48TH AVE
 Address:
 11913 TANTON LANE

 City-St-Zip:
 FORT LAUDERDALE, FL 33313
 City-St-Zip:
 CHARLOTTE, NC 28273

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSALPINA GLAVE P 05/24/2006