

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000079063

FILED
Apr 30, 2007
Secretary of State

Entity Name: EMERE G CORP.

Current Principal Place of Business:

1823 POLO LAKES DRIVE EAST
WELLINGTON, FL 33414

New Principal Place of Business:

11913 TANTON LANE
CHARLOTTE, NC 28273

Current Mailing Address:

11913 TANTON LANE
CHARLOTTE, NC 28273

New Mailing Address:

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

Name and Address of Current Registered Agent:

GLAVE, ROSALPINA
1823 POLO LAKES DRIVE EAST
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

GLAVE, ROSALPINA
1823 POLO LAKES DR
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 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: GLAVE, ROSALPINA
Address: 1823 POLO LAKES DRIVE EAST
City-St-Zip: WEST PALM BEACH, FL 33414

Title: T () Delete
Name: GLAVE, MARIA I
Address: 11913 TANTON LANE
City-St-Zip: CHARLOTTE, NC 28273

Title: VP () Delete
Name: GLAVE, ERIC C SR
Address: 11913 TANTON LANE
City-St-Zip: CHARLOTTE, NC 28273

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: GLAVE, ROSALPINA
Address: EXU 67 PO BOX 025723
City-St-Zip: MIAMI, FL 33102

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 PC 04/30/2007

Electronic Signature of Signing Officer or Director Date