FOR PROFIT COUNTFORM BUSINES	FILED May 06, 2002 8:00 am Secretary of State		
DOCUMENT # P990000 1. Entity Name Embich BROS. ROO	Fing, Int		05-06-2002 90175 041 ***150.00
DO NOT WRITE	· · · · · · · · · · · · · · · · · · ·	ACE	_ n
2. Principal Place of Business 1528 LANCE Rd. Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
Jupitan Fl.	City & State		4. FEI Number Applied For 59 - 2477891 Not Applicable
Zis 33469 PAIMBRACH	Zip	Country	5. Certificate of Status Desired 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent
DO NOT WRITE IN THIS SPACE			(P.O. Box Number is Not Acceptable)
		City PJ1	NTATION FL Zip Code 33322
 8. The above named entity submits this statement for the SIGNATURE	ute if applicable. (NOTE: January 1 - Ma After May 1 Amended Make Check Payabl	Registered Agent signature requi ay 1 Fee is \$150.00 I, Fee is \$550.00 UBR is \$61.25 e to Department of S	Trust Fund Contribution.
11. OFFICERS AND DI TITLE MARY EMBILK NAME IS28 LAW IR Pd. CITY-ST-ZIP JUPITAN F1. 33469 TITLE NAME STREET ADDRESS		TITLE , NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	CR2E034B (12/01)
CITY-ST-ZIP TITLE NAME 		CITY-ST-ZIP TITLE NAME 	DO NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
	vered to execute this report owered.		Section 119.07(3)(i), Florida Statutes. I further certify that the information le same legal effect as if made under oath; that I am an officer or director 60% Florida Statutes; and that my name appears in Block 11 or on an $354-781$