#### 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

#### DOCUMENT # P99000094212

1. Entity Name

EMERALD BOUQUET, INC.



Principal Place of Business

9800 NW 17TH STREET

STE 1 MIAMI, FL 33172 US - Mailing Address

% BRUCE JAY TOLAND, PA 80 SW 8TH ST, SUITE 2805

MIAMI, FL 33130

# FILED Feb 21, 2006 08:00 AM Secretary of State



### DO NOT WRITE IN THIS SPACE

02072006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0956389

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Admitional Fee Required

6. Name and Address of Current Registered Agent

BRUCE JAY TOLAND, P.A. 80 S.W. 8TH STREET - SUITE 2805 MIAMI, FL 33130

## DO NOT WRITE IN THIS SPACE

| 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

FILE NOW!!! FEE IS \$150.00 or May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

| After May 1, 2006 ree will be \$550.00         |   |       |  |  |
|--|---|-------|--|--|
| 10.  | OFFICERS AND DIRE   | CTORS |  |  |
| TSTLE NAME STREET ADDRESS CITY-ST-ZIP          | PD<br>VARELA, ALVARO<br>9475 NW 13TH STREET<br>MIAMI, FL 33172    |       |  |  |
| THTLE NAME STREET ADDRESS CHY-ST-ZIP           | STD<br>VARELA, MARIO<br>9475 NW 13TH STREET<br>MIAMI, FL 33172    |       |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          | AS HARRIS, ELLIOTT 111 SW 3RD STREET, SIXTH FLOOI MIAMI, FL 33130 | ₹     |  |  |
| TITLE NAME STREET ADDRESS CHY-ST-2#            | D<br>KARAMAT, KHAQAN<br>9475 NW 13TH STREET<br>MIAMI, FL 33172    |       |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>VARELA, MAURO<br>9475 N.W. 13TH ST.<br>MIAMI, FL 33172      |       |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |   |       |  |  |

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cette, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR OTT HATTIS

Assistant

2/16/06

(305)358-0146