2006 FOR PROFIT CORPORATION ANNUAL REPORT

Sep 05, 2006 8:00 am Secretary of State **DOCUMENT # S22091** 09-05-2006 90024 006 ***550.00 1. Entity Name EMIS DESIGNS, INC. **60038395** Principal Place of Business Mailing Address 219 ROYAL POINCIANA WAY **BOX 938 STE 01** PALM BEACH, FL 33480 PALM BEACH, FL 33480 CR2E034 (11/05) 07172006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0233723 Not Applicat \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEROS, EMIS DO NOT WRITE 219 ROYAL POINCIANA WAY PALM BEACH, FL 33480 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 acce 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 \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS 10. TILE BEROS, EMIS NAME STREET ADDRESS 2090 CHAGALL CIRCLE CITY-ST-ZIP WEST PALM BEACH, FL 33409 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P

12. I hereby certify that the information supplied with this filing 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 oath; that I am an officer or directly of the corporation or the receiver or truetee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attactiment with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS

FILED