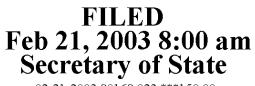
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) 456634 DOCUMENT



1. Entity Nar EMPIRE		HOP, INC.	02-21-2003 90169 023 ***150.00								
Principal Place of Business 1302 15TH STREET TAMPA FL 33605-5040			Mailing Address 1302 15TH STREET TAMPA FL 33605-5040								
2. Principal I	Place of Busi	2200	3. Mailing Address	 -	•						
2. Thicipar race of business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State			City & State			4.	4. FEI Number 59-1572237			Applied For Not Applicable	
Zip Country			Zip	Zip Coun			5. Certificate of Status Desired S8.75 Additional Fee Required			dditional	+
	6. Name	and Address of Current	Registered Agent			>≂7.⊭	Name and Address of New R	egistered			<u></u>
COMPARI	ETTO, BOB	RY RAY			Name						1
	TURIAS PL.	ואו		Street Address (P.O. Box Number is Not Acceptable)						1	
TAMPA F											\dashv
					City			FI	Zip Co	de .	\dashv
8. The above the obligation	e named entit tions of regist	y submits this statement for tered agent.	or the purpose of changing i	ts register	L ed office or regist	ered ag	ent, or both, in the State of Flor			, and accept	1
SIGNATURE	Signature, typed	or printed name of registered agent	and title if applicable. (NC	TE: Registere	d Agent signature requir	ed whon re	sinetating\	DATE			
		!! FEE IS \$150.00 03 Fee will be \$550.00		,			9. Election Campaign Fina		\$5.1	00 May Be	$\frac{1}{2}$
Make Checi	k Payable to	o Florida Department o	f State				Trust Fund Contribution	٠.		ed to Fees	
10.		OFFICERS AND	DIRECTORS	11.		AD	L DDITIONS/CHANGES TO OFFI	CERS AN	D DIRECTOR	RS IN 11	\dashv
TITLE NAME STREET ADDRESS DITY-ST-ZIP	PD COMPARE 2608 ASTI TAMPA FL		☐ Delete		1				☐ Change	Addition	(00/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITEE NAMI STRE					☐ Change	☐ Addition	Control
TITLE NAME STREET ADDRESS CITY-ST-ZIP		: :	☐ Delete	TITLE NAME STREE		Telegraphy and		-	☐ Change	☐ Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP			☐ Delete		i i				☐ Change	Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP			☐ Delete		1				☐ Change	Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP	antifu di - 1 di		☐ Delete	CITY-	T ADDRESS ST-ZIP		19.07(3)(i), Florida Statutes. I f	- 113-1	☐ Change	☐ Addition	

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 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 their like empowered.

SIGNATURE: