

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90104 003 ***150.00

DOCUMENT # 646326

1. Entity Name

EMPIRE COMMUNICATIONS GROUP, INC.

Principal Place of Business

6834 OLD KINGS RD SO
 JACKSONVILLE FL 32217
 US

Mailing Address

6834 OLD KINGS RD SO
 JACKSONVILLE FL 32217-2804
 US

2. Principal Place of Business

6279 Dupont Station Court
 Suite, Apt. #, etc.

3. Mailing Address

6279 Dupont Station Court
 Suite, Apt. #, etc.

City & State

Jacksonville Florida

City & State

Jacksonville, Florida

4. FEI Number

59-1952063

Applied For

Not Applicable

Zip

32217

Country

Duval

Zip

32217

Country

Duval

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HELOW, PETER A
 6834 OLD KINGS RD SO
 JACKSONVILLE FL 32217

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DP	HELOW, PETER A	6834 OLD KINGS RD SO	JACKSONVILLE FL	<input type="checkbox"/> Delete			6279 Dupont Station Court	Jacksonville, Florida 32217	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DV	LOGGINS, GEORGE L III	6834 OLD KINGS RD SO	JACKSONVILLE FL 32217	<input type="checkbox"/> Delete			6279 Dupont Station Court	Jacksonville, Florida 32217	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
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				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/00

Date

904-739-0000

Daytime Phone #

CR2E034 (9/99)