2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003915

Entity Name: EMPIRE OF MICHIGAN, INC.

FILED Aug 16, 2005 Secretary of State

Current Pi	incipal Place	of Business:	New Principal Place of Business:				
8181 LOGI	-						
Current Mailing Address:			New Mailing Address:				
PO BOX 17 ZEELAND,	7 MI 494640017	,					
FEI Number: 38-3135188 FEI Number Applied		FEI Number Applied For ()	FEI Number Not Applicable ()		Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
1200 SOUT	ORATION SYS TH PINE ISLAN ON, FL 33324						
The above in the State		ubmits this statement for the pu	urpose of changing it	s registered offi	ce or registered agent,	or both,	
SIGNATUF	RE:						
	Electroni	c Signature of Registered Ager	nt	Date			
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CEO () HIGHLEY, THOM 8181 LOGISTIC ZEELAND, MI 4	DR	Title: Name: Address: City-St-Zip:	() 0	Change () Addition		
Title: Name: Address: City-St-Zip:	CFO () JOHANDES, STE 8181 LOGISTIC ZEELAND, MI 4	DR	Title: Name: Address: City-St-Zip:	VP (X) C JOHANDES, STE 8181 LOGISTIC E ZEELAND, MI 49	OR .		
Title: Name: Address: City-St-Zip:	COO () GROSSMAN, ST 8181 LOGISTIC ZEELAND, MI 4	DR	Title: Name: Address: City-St-Zip:	() C	Change () Addition		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	CFO () C WHITE, ADAM 8181 LOGISTIC I ZEELAND, MI 49			

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN SPALDING CONT 08/16/2005