FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 05, 2003 8:00 am Secretary of State

DOCUMENT # F98000001200						05-05-2003 92209 029 ***150.00		
1. Entity Name								
EMPIRE MANAGEMENT SERVICES, INC.								
	DO NO	T WRITE	IN THIS S	DΔC	E			
	DO NO	1 111/11	in this s	ıAV	Ţ			
			3. Mailing Address	. Mailing Address 13810 FNB PARKWAY				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State			City & State			4. FEI Number 47 0704594	Applied For	
OMAHA, NE Zip Country			OMAHA, NE Zip Country		itry	47-0794581	Not Applicable	
68154-52			68154-5202	USA		9. Certificate of Status Desired	ee Required	
DO NOT WRITE IN THIS SPACE			RITE		61	7. Name and Address of Current Registered TAZZONE	Agent	
						P.O. Box Number is Not Acceptable)		
			FIOL		İ	ATLANTIC AVENUE	Zin Codo	
The above named entity submits this statement for the purpose of changing its r					City COCOA			
	e named entity sub tions of registered		the purpose of changing its	s registere	ed office of register	ed agent, or both, in the state of Florida. I am fa	miliar with, and accept	
SIGNATURE							I .	
	Signature, typed or print nuary 1 - May 1	ed name of registered agent a Fee Is \$150.00	nd trie if applicable. (NO	E: Registere	d Agent signature required	when reinstaing) DATE		
After May 1, Fee is \$550.00 Amended UBR is \$61.25						Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
Make Check		ida Department of OFFICERS AND I					,,, ,,,,,,,	
TITLE	P/D - Steve		JIRECTORS	ภาบ			6	
name Street address	13810 FNB			NAM	ET ADDRESS		(45)	
CITY-ST-ZIP	Omaha, NE	68154-5202		3	-SI-ZIP		a vo	
TITLE NAME	V/D - Charle	s Ralph		TITLE			300	
STREET ADDRESS Ome No. NE. 69154 5202			8	ET ADDRESS	and the second			
CITY-ST-ZIP	Omana, NE	08104-0202			-S1-ZIP			
TITLE NAME	S/T/D - John			TOTE E NAME				
STREET ADDRESS 13810 FNB Parkway CITY-ST-ZIP Omaha, NE 68154-5202			100 (200) (2000)	DO NOT WRITE				
777.5			TITLE					
NAME STREET ADDRESS CITY-ST-ZIP AS ~ Raymond J. Warfield 1400 American Lane Schaumburg, IL 60196			NAM					
			200000000000000000000000000000000000000	ET ADDRESS -ST-ZIP				
TITLE		***************************************		πιε				
NAME	£			NAME	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
STREET ADDRESS				■ STRE	ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP				CITY	-SI-ZIP			
					-S1-2P			

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _

SUSANTINE AND TYPED OR PRINTED NAME OF SIGNIN

Raymond J. Warfield

4/9/03

847/605-6791 Daytime Phone #