

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J85493

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: EMPIRE PRESS INC.

**Current Principal Place of Business:**

10519 SW 109 COURT  
MIAMI, FL 33176 US

**New Principal Place of Business:**

**Current Mailing Address:**

10519 SW 109 COURT  
MIAMI, FL 33176 US

**New Mailing Address:**

FEI Number: 65-0014681      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROMAN, NITZA  
10519 SW 109 COURT  
MIAMI, FL 33176 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ROMAN, PAUL  
Address: 17560 ATLANTIC BLVD  
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: VP ( ) Delete  
Name: ROMAN, NITZA  
Address: 7064 SW 158TH PATH  
City-St-Zip: MIAMI, FL 33193 US

Title: D ( ) Delete  
Name: ROMAN, GILBERTO  
Address: 1256 NE 149 STREET  
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: D ( ) Delete  
Name: CINTRON, EMMA  
Address: 12241 SW 185 TERRACE  
City-St-Zip: MIAMI, FL 33177 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ROMAN, PAUL  
Address: 11190 SW 107 STREET  
City-St-Zip: KENDALL, FL 33176 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: NITZA ROMAN

VP

04/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date