2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J85493

City-St-Zip:

Entity Name: EMPIRE PRESS INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
10519 SW MIAMI, FL	109 COURT 33176 US				
Current Mailing Address:			New Mailing Address:		
10519 SW MIAMI, FL	109 COURT 33176 US				
FEI Number:	65-0014681	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
MIAMI, FL The above	109 COURT 33176 US named entity s	submits this statement for the	purpose of changing i	its registered office or registered agent, or both	
	e of Florida.				
SIGNATUF		ic Signature of Registered Ag	ent .	Date	
Election Can		Trust Fund Contribution ().	O.I.	Jule	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Fitle: Name: Address: City-St-Zip:	P () ROMAN, PAUL 11190 SW 107 KENDALL, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Jame: Address: City-St-Zip:	VP () ROMAN, NITZA 7064 SW 158TH MIAMI, FL 3319		Title: Name: Address: City-St-Zip:	()Change ()Addition	
itle: lame: lddress: Dity-St-Zip:	D () ROMAN, GILBE 1256 NE 149 ST NORTH MIAMI,	reet	Title: Name: Address: City-St-Zip:	() Change () Addition	
itle: lame: ddress: city-St-Zip:	D () CINTRON, EMM 12241 SW 185 MIAMI, FL 3317	TERRACE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Fitle: Name: Address:	()	Delete	Title: Name: Address:	D () Change (X) Addition ROMAN, MARGIE 2862 CHINKAPIN OAK LANE	

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.

City-St-Zip: WOODBRIDGE, VA 22191

SIGNATURE: NITZA ROMAN VP 04/28/2009