

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90085 001 *****50.00
04-28-2004 90085 002 *****5.00

DOCUMENT # L03000035198

1. Entity Name
EMPIRE INVESTMENTS, LLC



Principal Place of Business
**8149 OAKLAND PLACE
ORLANDO, FL 32819**

Mailing Address
**8149 OAKLAND PLACE
ORLANDO, FL 32819**



Principal Place of Business

Mailing Address

Suite, Apt. #, etc.

SAME

Suite, Apt. #, etc.

SAME

City & State

City & State

Zip

Country

Zip

Country

04142004 Chg-LLC CR2E083 (10/03)

4. EEI Number

54-2127833

Applied For

Not Applicable

5. Certificate of Status Desired

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**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SONNENSCHN, MICHAEL D.
C/O STEIN, SONNENSCHN, ET AL
1420 ALAFAYA TRAIL, SUITE 101
OVIEDO, FL 32765**

7. Name and Address of New Registered Agent

Name **RUDY G. SANTIAGO**
Street Address (P.O. Box Number is Not Acceptable)
8149 OAKLAND PL
ORLANDO FL 32819
City **FL** Zip Code **32819**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Rudy Santiago President (RUDY G. SANTIAGO)

4-19-04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT RUDY SANTIAGO 8149 OAKLAND PL ORLANDO FL 32819	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER RUDY SANTIAGO 8149 OAKLAND PL ORLANDO FL 32819	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT MARIO SANTIAGO 8149 OAKLAND PL ORLANDO FL 32819	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY EDWARD SANTIAGO 10429 BIG TREE COURT ORLANDO FL 32836	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Rudy Santiago President 4/19/04 (813) 781-0716

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

0716