

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000016955

1. Entity Name  
EMPIRE TRANSPORTATIONS, INC.

Principal Place of Business  
5381 B HOFFNER AVE  
ORLANDO FL 32812

Mailing Address  
5381 B HOFFNER AVE  
ORLANDO FL 32812

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3622600

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALVES, LUIZ R  
2809 WHISPER LAKE CLUB  
ORLANDO FL 32837

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ALVES, LUIZ R  
2809 WHISPER LAKE CLUB  
ORLANDO FL 32837 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9-4-01 (407) 341-5811

**FILED**  
**Sep 10, 2001 8:00 am**  
**Secretary of State**

09-10-2001 90005 006 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

001366 AV 6896100

CR2E034 (5/01)

Attachment  
DH#P00000016955  
AUG 4 3 45

EMPIRE TRANSPORTATION INC

DIVISION OF CORPORATION T  
UNIFORM BUSINESS REPORT FILINGS  
P.O. BOX 1500  
TALLAHASSEE, FL 32302-1500

REF: DOCUMENT#P00000016955

Dear Sir or Madam:

I AM SENDING THE CORPORATE 2001 RENEWAL FORM FOR EMPIRE  
TRANSPORTATION, INC. UNFORTUNATE I DID NOT GET THE FIRST  
RENEWAL FORM ON MY MAILING ADDRESS.  
I AM SENDING A CHECK AND THE SECOND FORM YOU MAILED TO  
ME. HOPEFULLY YOU WILL RENEW MY CORPORATION WITHOUT ANY  
PENALTIES AND EXTRA CHARGES.

SINCERELY

LUIZ ROBERTO ALVES  
PRESIDENT