

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90164 016 \*\*\*150.00

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1. Entity Name  
EMPORIUM GENERAL SERVICES, INC.



Principal Place of Business  
9500 S.W. 3RD ST.  
215 A  
BOCA RATON, FL 33428

Mailing Address  
7105 S.W. 8TH ST.  
309  
MIAMI, FL 33144

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04232004

Chg-P

CR2E034 (10/03)

4. FEI Number  
65-1061894

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

FORERO, JULIO C  
9500 S.W. 3RD ST.  
215 A  
BOCA RATON, FL 33428

## 7. Name and Address of New Registered Agent

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

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME FORERO, JULIO C  
STREET ADDRESS 9500 S.W. 3RD ST. #215-A  
CITY-ST-ZIP BOCA RATON, FL 33428

TITLE VD ☐ Delete  
NAME RIVERA, FREDDY J  
STREET ADDRESS 13758 SW 158 TERR  
CITY-ST-ZIP MIAMI, FL 33177

TITLE VD ☐ Delete  
NAME FORERO, MAURICIO  
STREET ADDRESS 9500 S.W. 3RD ST. #215-A  
CITY-ST-ZIP BOCA RATON, FL 33428

TITLE TD ☐ Delete  
NAME FORERO, DIEGO H  
STREET ADDRESS 9500 S.W. 3RD ST.  
CITY-ST-ZIP BOCA RATON, FL 33428

TITLE D ☐ Delete  
NAME FORERO, ARACELI  
STREET ADDRESS 9500 S.W. 3RD ST.  
CITY-ST-ZIP BOCA RATON, FL 33428

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

SIGNATURE:

*Julio C. Forero*

*officer 4/28/04*

*(305)226-3943*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #