

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000029837

FILED
Apr 27, 2006
Secretary of State

Entity Name: EMPIRE STREET WEAR, INC.

Current Principal Place of Business:

3100 SW COLLEGE RD #582
SUITE 458
OCALA, FL 34474

New Principal Place of Business:

3100 SW COLLEGE RD
582
OCALA, FL 34474

Current Mailing Address:

3100 SW COLLEGE RD #582
SUITE 458
OCALA, FL 34474

New Mailing Address:

FEI Number: 59-3714096 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SULAIMAN, RIAD
3100 SW COLLEGE RD #582
OCALA, FL 34474 US

Name and Address of New Registered Agent:

SULAIMAN, RIAD
3100 SW COLLEGE RD
582
OCALA, FL 34474 US

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:

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SULAIMAN, RIAD
Address: 3100 SW COLLEGE RD #582
City-St-Zip: OCALA, FL 34474

Title: T () Delete
Name: AHMAD, MOHAMMAD
Address: 3100 SW COLLEGE RD #582
City-St-Zip: OCALA, FL 34474

Title: S () Delete
Name: AHMAD, NEDAL
Address: 3100 SW COLLEGE RD #582
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SULAIMAN, RIAD
Address: 5555 SW 84TH PL
City-St-Zip: OCALA, FL 34476

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

Title: S (X) Change () Addition
Name: AHMAD, NEDAL
Address: 3240 SW 34TH ST
City-St-Zip: OCALA, FL 34474

I hereby certify that the information supplied with this filing does not qualify for the 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: RIAD SULAIMAN

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date