

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000002909						
1. Entity Name EMPRISE INDUSTRIES INC.						
Principal Place of Business 1180 SO. OCEAN BOULEVARD SUITE #14C BOCA RATON, FL 33432	Mailing Address 1180 SO. OCEAN BOULEVARD SUITE #14C BOCA RATON, FL 33432	 01302006 No Chg-P CR2E034 (11/05) <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 60%; padding: 2px;">4. FEI Number 26-0030720</td><td style="width: 40%; padding: 2px;">Applied For Not Applicable</td></tr><tr><td colspan="2" style="padding: 2px;">5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required</td></tr></table>	4. FEI Number 26-0030720	Applied For Not Applicable	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required						
DO NOT WRITE IN THIS SPACE						
6. Name and Address of Current Registered Agent BIZZARRO, DAWN R 1180 SO. OCEAN BOULEVARD SUITE #14C BOCA RATON, FL 33432		DO NOT WRITE IN THIS SPACE				
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 _____ (NOTE: Registered Agent signature required when rechartering) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.						
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees				
10. OFFICERS AND DIRECTORS						
TITLE	VP	DO NOT WRITE IN THIS SPACE				
NAME	BIZZARRO, LEONARD					
STREET ADDRESS	1180 S. OCEAN BL SUITE #14C					
CITY-ST-ZIP	BOCA RATON, FL 33432					
TITLE	PRES					
NAME	BIZZARRO, DAWN R					
STREET ADDRESS	1180 S. OCEAN BL. #14C	DO NOT WRITE IN THIS SPACE				
CITY-ST-ZIP	BOCA RATON, FL 33432					
TITLE						
NAME						
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CITY-ST-ZIP						
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CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Leonard A. Bizzarro</u> LEONARD A. BIZZARRO		1/30/06 561-750-5309 Date Daytime Phone #				