2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000035766

Entity Name: EMPIRE EVENTS CONSULTING INC

FILED Mar 27, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|---|----------------------------------|---|--|--|
| #222 | SHINGTON AV ACH, FL 3313 | | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| 6767 COL #1509 MIAMI BEA | LINS AVE ACH, FL 3314 | 1 | | | |
| FEI Number | : 51-0454722 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address | Name and Address of New Registered Agent: | |
| 6767 COĹ #1509 | PERRY P LINS AVE ACH, FL 3314 | 1 US | | | |
| The above in the State | e named entity e of Florida. | submits this statement for the p | ourpose of changing its registere | ed office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| | Electro | nic Signature of Registered Ag | ent | Date | |
| Election Ca | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P (SASSON, PER 6767 COLLINS MIAMI BEACH, | AVE #1509 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | V (ROBBINS, MIC 6767 COLLINS MIAMI BEACH, | AVE #1509 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | LEVINE, JUSTI | BLUFF DRIVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL ROBBINS V 03/27/2008