2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097134

Entity Name: EMPCO CONSULTING CORP

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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14735 SW 85TH TER 882 SW 70TH AVE MIAMI, FL 33193 MIAMI, FL 33144

Current Mailing Address: New Mailing Address:

P.O. BOX 669038 882 SW 70TH AVE MIAMI, FL 33166 MIAMI, FL 33144

FEI Number: 20-1295361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 MATILLA, PABLO A
 MATILLA, PABLO A

 14735 SW 85TH TER
 882 SW 70TH AVE

 MIAMI, FL 33193 US
 MIAMI, FL 33144 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: PABLO A MATILLA 01/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MATILLA, PABLO A Name: MATILLA, PABLO A

 Address:
 14735 SW 85TH TER
 Address:
 882 SW 70TH AVE

 City-St-Zip:
 MIAMI, FL 33193
 City-St-Zip:
 MIAMI, FL 33144

Title: VP () Delete Title: VP (X) Change () Addition Name: MATILLA, EILEEN Name: MATILLA, EILEEN

 Name:
 MATILLA, EILEEN
 Name:
 MATILLA, EILEEN

 Address:
 14735 SW 85TH TER
 Address:
 882 SW 70TH AVE

 City-St-Zip:
 MIAMI, FL 33193
 City-St-Zip:
 MIAMI, FL 33144

Title: T (X) Delete Title: () Change () Addition

 Name:
 HERNANDEZ, EUGENIO
 Name:

 Address:
 14735 SW 85TH TER
 Address:

 City-St-Zip:
 MIAMI, FL 33193
 City-St-Zip:

Title: S (X) Delete Title: () Change () Addition

 Name:
 HERNANDEZ, DOLORES
 Name:

 Address:
 14735 SW 85TH TER
 Address:

 City-St-Zip:
 MIAMI, FL 33193
 City-St-Zip:

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: PABLO A MATILLA PD 01/21/2009