

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2005 8:00 am
Secretary of State

06-15-2005 90094 046 ***150.00

DOCUMENT # P04000162249

1. Entity Name
F.D.R. EMPIRE, INC.



Principal Place of Business
4461 NW 25TH PL
LAUDERHILL, FL 33313

Mailing Address
4461 NW 25TH PL
LAUDERHILL, FL 33313

66024076



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06242005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

Applied For

14-1919211

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROCHESTER, DENIS
4461 NW 25TH PL
LAUDERHILL, FL 33313

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME ROCHESTER, DENIS
STREET ADDRESS 4461 NW 25TH PL
CITY-ST-ZIP LAUDERHILL, FL 33313

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/24/05 954-701-5772

Date

Daytime Phone #

ATTACHMENT

June 24, 2005

P04000162249

66024076

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Reference Number: P04000162249

Dear Sir or Madam:

This letter is written in response to the letter received after our client, F.D.R. Empire, Inc., submitted the Annual Report Form late. A letter asking that the late fee be waived had accompanied his application.

This is the first time F.D.R. Empire, Inc. has filed an Annual Report Form and had received no correspondence from the Florida Department of State about the need to file the report. I explained the situation to Jessica, one of your agents, who assured me if I sent in a new application and letter that there should not be a problem in waiving the penalty. We are requesting abatement of the penalties charged due to the fact F.D.R. Empire, Inc. never received the original Annual Report Form. The \$150 has already been paid to the Florida Department of State.

Thank you,



Steven H. Machiela, CPA