

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2005 8:00 am
Secretary of State

03-08-2005 90185 010 ***150.00

DOCUMENT # P04000164977 1. Entity Name EVIL EMPIRE, INC.			
Principal Place of Business 2276 HERITAGE GREENS DR. NAPLES FL 34119		Mailing Address 2276 HERITAGE GREENS DR. NAPLES FL 34119	
2. Principal Place of Business 28851 BERMUDA LAGO CT Suite, Apt. #, etc. UNIT 201		3. Mailing Address 28851 BERMUDA LAGO CT Suite, Apt. #, etc. UNIT 201	
City & State BONITA SPRINGS FL		City & State BONITA SPRINGS FL	
Zip 34134	Country U.S	Zip 34134	Country U.S
4. FEI Number 43-2071463		☒ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LANDI, JOHN A 2276 HERITAGE GREENS DR. NAPLES FL 34119		7. Name and Address of New Registered Agent 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 JOHN A. LANDI 2/27/05 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	NAME LANDI, JOHN A	TITLE D	NAME LANDI, JOHN A
STREET ADDRESS 2276 HERITAGE GREENS DR.	CITY-ST-ZIP NAPLES FL 34119	STREET ADDRESS 28851 BERMUDA LAGO CT UNIT 201	CITY-ST-ZIP BONITA SPRINGS FL 34134
TITLE D	NAME LANDI, LORI L	TITLE D	NAME LANDI, LORI L
STREET ADDRESS 2276 HERITAGE GREENS DR.	CITY-ST-ZIP NAPLES FL 34119	STREET ADDRESS 28851 BERMUDA LAGO CT UNIT 201	CITY-ST-ZIP BONITA SPRINGS FL 34134
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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: JOHN A. LANDI		Date: 2/27/05 (239) 289-6297	