

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000064441

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: EMPOWERU ENTERPRISES INC

## Current Principal Place of Business:

484 SEALY DR  
WEWAHITCHKA, FL 32465

## New Principal Place of Business:

## Current Mailing Address:

484 SEALY DR  
WEWAHITCHKA, FL 32465

## New Mailing Address:

FEI Number: 26-0293663

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELOZIER, BARBARA  
484 SEALY DR  
WEWAHITCHKA, FL 32465 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DELOZIER, BARBARA  
Address: 484 SEALY DR  
City-St-Zip: WEWAHITCHKA, FL 32465

Title: VP ( ) Delete  
Name: BROWN, JANICE L  
Address: 75330 OLSON RD  
City-St-Zip: CLATZKANIE,, OR 97016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: BROWN, JANICE L  
Address: 75330 OLSON RD  
City-St-Zip: CLATSKANIE,, OR 97016

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: BARBARA S. DELOZIER

PRES

01/04/2008

Electronic Signature of Signing Officer or Director

Date