

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000080037

FILED  
Apr 23, 2012  
Secretary of State

Entity Name: EMPOWERMENT CENTER FOR YOUNG ENTERPRISERS INC.

**Current Principal Place of Business:**

4929 9TH AVE. SOUTH  
GULFPORT, FL 33707 US

**New Principal Place of Business:**

**Current Mailing Address:**

4929 9TH AVE. SOUTH  
GULFPORT, FL 33707 US

**New Mailing Address:**

1200-37TH STREET NORTH  
APT.206  
ST.PETERSBURG, FL 33713

FEI Number: 45-3236837

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAK COURT  
SUITE A  
TAMPA, FL 33612 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

**OFFICERS AND DIRECTORS:**

Title: P, T  
Name: WEAVER, CATHERINE  
Address: 4929 9TH AVE. SOUTH  
City-St-Zip: GULFPORT, FL 33707 US

Title: S  
Name: WEAVER, CHARLES  
Address: 4929 9TH AVE. SOUTH  
City-St-Zip: GULFPORT, FL 33707 US

Title: D  
Name: WEAVER, CATHERINE  
Address: 4929 9TH AVE. SOUTH  
City-St-Zip: GULFPORT, FL 33707 US

I hereby 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 all other like empowered.

SIGNATURE: CATHERINE WEAVER

P

04/23/2012

Electronic Signature of Signing Officer or Director

Date