FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000026358 (8)

EMPIRE MARINE, CORP.

							···········						
Principal Place of Business 355 W. 20TH STREET. #101 HALEAH FL 33010				Mailing Address 355 W. 20TH STREET, ≢101 HALEAH FL 33010-2506							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
									3. Date Incorporated or Qualified 03/30/1995		e of Last 3/1996		
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			Applied For	
21				26					65-0564594 Not Applicable				
Suite, Apt #, etc				Suite, Apt. #, etc.					5. Certificate of Status Desired	ired S8.75 Additional Fee Required			
Crty & State				City & State					6. Election Campaign Financing		\$5.0	0 May Be	
23									Trust Fund Contribution Added to Fees				
Zip		Country	n	*******			,		8. This corporation has fiability for intengible tax under s. Florida Statutes Yes No			rs. 199.032,	
24	0 Nama a	5 nd Address of Curr	29	red Agent	30	 -			Florida Statutes 10. Name and Address of New Re				
\A11	A, DIONISIO	na Address of Colf	on negiste	ied Agent		81	Nar		IV. Halle alle Acciess of New Ne	Augral act v	Activ	<u></u>	
		DEET #101					<u> </u>						
355 W. 20TH STREET, #101 HIALEAH FL 33010				Ī			Stre	et Addre	dress (P.O. Box Number is Not Acceptable)				
HWW	PENILL 000					83	 						
								,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				······································	
						84	City			FL	85 Zi	ip Code	
office or	registered age am familiar with	ns of Sections 607.08 nt, or both, in the Sta , and accept the obl	te of Florida igations of,	Such change was Section 607.0505, F	s authoriz Florida St	ed by atutes	y the o	corporati	oration submits this statement for the on's board of directors. I hereby acce	pt the appo	changing intment	as registered	
12.		OFFICERS A			13	<u>.</u>	ort Digita		ADDITIONS/CHANGES TO OFFI		DIRECTO	ORS IN 12	
TITLE	TPV			DELETE		TITLE					Change		
NAME	VILLA, DIO				1,2	NAME		1					
STREET ADDRESS		TH STREET, #101			1,3	STREET	ADDRE	SS					
CITY - ST - ZIP	HIALEAH F	L 33010			1.4	CITY · \$	ST-ZIP						
TITLE	STD			DELETE	2.1	TITLE					Chang	e 🔲 Addition	
INAME	VILLA, DIO				2.2	NAME							
STREET ADORESS		TH STREET, #101			2.3	STREET	ADDRE	ss					
CITY - ST - ZIP	HIALEAH F	L 33010			2.4	CITY-	ST-ZIP						
TITLE				DELETE	3.1	TITLE					☐ Chang	e 🔲 Addition	
NAME					3.2	NAME							
STREET ADDRESS					3.3	STREET	ADDRE	ss					
CITY+S1-ZIP						CITY-!	ST-21P		1.	·			
TITLE				☐ DELETE		TITLE					Chang	je 🔲 Addition	
NAME					4. 2	NAME							
STREET ACCRESS					4.3	STREET	I ADDRE	SS	• •				
Cily · ST · ZiP				1 55.555		CITY-S	T-ZIP		······································		T 66		
TITLE				☐ DELETE		TITLE				•	Chang	ge	
NAME						NAME							
STREET ADDRESS							i addre	SS		•			
City-ST-7IP				T beleve		CITY-S	ST-ZIP				T 65	4 2 2 2 2 2	
TITLE				☐ DELETE		TITLE					L. Chang	ge L. Addition	
NAME						NAME							
CIDECT AGRACICS	1				6.3	STREET	T AND DE	cc I					

6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 of required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-04-1997

FILED

Feb 11 1997 8:00am

Secretary of State

0114669