2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004
Secretary of State

DOCUMENT# P96000031455

Entity Name: EMPIRE INSURANCE COMPANY USA

Current Principal Place of Business:

6855-A MIRAMAR PKWY
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

6855-A MIRAMAR PKWY
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 65-0659613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GELLER, ADAM B
6855 MIRAMAR PARKWAY
MIRAMAR, FL 33023 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: GELLER, ADAM
Address: 2630 SW 68TH TERR
City-St-Zip: POMPANO BEACH, FL 33068

Title: D ( ) Delete
Name: GREENBERG, LISA
Address: 11718 S. ISLAND RD
City-St-Zip: COOPER CITY, FL 33026

Title: D (X) Delete
Name: RODRIGUEZ, TANIA M
Address: 20231 NW 8TH ST
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D (X) Delete
Name: GELLER, ALISSA
Address: 8856 NW 49TH DR
City-St-Zip: CORAL SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ADAM B. GELLER P 04/22/2004

Electronic Signature of Signing Officer or Director — Date