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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATI

Secretary of State

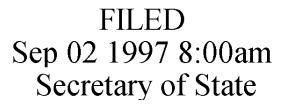
DIVISION OF CORPORATIONS

## DOCUMENT # P9600059649 (9)

## **EMPIRE INTER CORPORATION**

Principal Place of Business

Mailing Address





Principal Place	oi Business	Mailing Addres	Maling Address					
13765 SW 80TH		13765 SW BOTH AVE. MIAMI FL 33158-1134						
						3. Date Incorporated or Qualified 07/15/1996	3a. Date of Last F	Report
	ace of Business	2a. Mailing Address				4. FEI Number	, VA	pptied For
21		[26]					N	ot Applicable
Suite, Apt. (	f, etc.	Sulte, Apt. #, etc.				5. Certificate of Status Desired		Additional
22 City & State		City & State						equired
23	•	City & State				6. Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country		Zip Country			Trust Fund Contribution Added to Fees  8. This corporation has liability for intangible tax under s. 199.032.		
4 25		29	30	30			Yes No	5. 199.USZ,
	9. Name and Address of Curre	<del></del>	· · · · · · · · · · · · · · · · · · ·			10. Name and Address of New Re	gistered Agent	
LOP	EZ, JOAQUIN R			81	Name			
	IS SW 80TH AVE.			82	Street Ac	Idress (P.O. Box Number is Not Acceptate	ole)	<del>.</del>
MAM	AI PL 33158			Ĺ	0			
				83				
				84	City		<b>85</b> Zip	Code
<i>*</i>					′			
office or regard. I an	o the provisions of sections 607.050 ogistered agent, or both, in the State of familiar with, and accept the oblig	e of Florida Such cha ations of, Section 607	nge was aut 2.0505, Florid	, the above horized by da Statute:	e-named co / the corpo s.	orporation submits this statement for the praction's board of directors. I hereby accept	ourpose of changing i of the appointment as	ts registered registered
SIGNATURE -	Sign <b>ature</b> , typed or printed name of registered ago	ent ano titic if applicable	(NOTE F	tog-stered Age	ent signature re	quired when reinstating)	DATE	
12.		D DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12
TITLE	POST	t	ELETE	1.1 TITLE		-	☐ Change	Addition
NAME	PADRON, FERNANDO N			1.2 NAME				
STREET ADDRESS	13765 SW 80TH AVE.			1.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33158			14 CITY-S	IT - 7IP			
TITLE		با ليا	ELETE	21 TITLE	-		Change	☐ Addition
			A	2.2 NAME				
OTTO TO THE OWNER OF THE OWNER OWNER OF THE OWNER OW				2.3 STREET				
OTY-ST-ZIP TITLE		<b>—</b>	ELETE	2. 4 CITY - : 3.1 TITLE	ST-ZIP		Change	Addition
NAME			CCCTC	3.2 NAME			C. Onunge	
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				3 4. CITY-				
TITLE			ELETE	4.1 TITLE			☐ Change	Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY - S	17 - ZIP			
TITLE			ELFIE	5.1 1/TLE			☐ Change	☐ Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST-ZIP	<u></u>			5.4 CITY - S	T-ZIP			
TITLE		☐ D	ELETE	6.1 TITLE			☐ Change	☐ Addition
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREET	ADDRESS			
CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·	6.4 CITY-S				
information	indicated on this annual report or s	supplemental annual the receiver or truste	roport is true	and accu	rate and th	led in Section 119.07(3)(i), Florida Statute nat my signature shall have the same lega port as required by Chapter 607, Florida S	il effect as if made un	der oath; that