

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90002 036 ***150.00

DOCUMENT # P98000103406

1. Corporation Name
EMPIRICAL FILMS INC.

Principal Place of Business

3549 LOQUAT AVE.
MIAMI FL 33133

Mailing Address

3549 LOQUAT AVE.
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/10/1998

4. FEI Number

65-0882269

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 320 NE 98 ST.

Suite, Apt. #, etc.

22 City & State

23 MIAMI FL

Zip

24 33138

Country

25 USA

2a. Mailing Address

26 320 NE 98 ST.

Suite, Apt. #, etc.

27 City & State

28 MIAMI FL

Zip

29 33138

Country

30 USA

9. Name and Address of Current Registered Agent

MOORE, J. MAYA
3549 LOQUAT AVE.
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

J. MAYA MOORE

82 Street Address (P.O. Box Number is Not Acceptable)

320 NE 98 ST.

83

84 City

MIAMI

FL

85 Zip Code

33138

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

J. MAYA MOORE

(NOTE: Registered Agent signature required when reinstating)

4/15/99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME MOORE, J. MAYA
STREET ADDRESS 3549 LOQUAT AVE.
CITY-ST-ZIP MIAMI FL 33133

TITLE D ☐ DELETE

NAME WRIGHT, G.L.
STREET ADDRESS 3549 LOQUAT AVE.
CITY-ST-ZIP MIAMI FL 33133

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME MOORE, J. MAYA
1.3 STREET ADDRESS 320 NE 98 ST.
1.4 CITY-ST-ZIP MIAMI, FL 33138

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME WRIGHT, G.L.
2.3 STREET ADDRESS 320 NE 98 ST.
2.4 CITY-ST-ZIP MIAMI, FL 33138

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 as 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, with all other like empowered.

SIGNATURE:

J. MAYA MOORE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/99

DATE

305-758-8167

Daytime Phone #

CR2E034 (11/98)