

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000062176**

1. Entity Name

EMPERIAL DESIGN, INC.**FILED**
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90137 018 ***150.00

Principal Place of Business

**9915 TAMiami TRAIL NORTH, SUITE 2
NAPLES FL 34108**

Mailing Address

**9915 TAMiami TRAIL NORTH, SUITE 2
NAPLES FL 34108**

2. Principal Place of Business

1226 E. HENRY AVENUE

Suite, Apt. #, etc.

3. Mailing Address

1226 E. HENRY AVENUE

Suite, Apt. #, etc.

City & State

TAMPA, FL

City & State

TAMPA, FL

Zip

33604

Country

Zip

33604

Country

4. FEI Number

59-3587380

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**WANDERON, THOMAS
9915 TAMiami TRAIL NORTH, SUITE 2
NAPLES FL 34108**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D FLEISCHER, MICHAEL	110A PLANTATION CT. EAST	TAMPA FL 33617	<input type="checkbox"/>

	D DOWNER, PAUL	13403 MIKE DR.	TAMPA FL 33617	<input checked="" type="checkbox"/>
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	D PINTER, CORY	12201 N. 50TH ST., #45	TAMPA FL 33617	<input checked="" type="checkbox"/>
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				<input type="checkbox"/>
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				<input type="checkbox"/>
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				<input type="checkbox"/>
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	D FLEISCHER, MICHAEL	1226 E. HENRY AVENUE	TAMPA, FL 33604	<input checked="" type="checkbox"/>	<input type="checkbox"/>

				<input type="checkbox"/>	<input type="checkbox"/>
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				<input type="checkbox"/>	<input type="checkbox"/>
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MICHAEL FLEISCHER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)