

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000080037

**FILED**  
**Apr 24, 2024**  
**Secretary of State**  
**8452110904CC**

**Entity Name:** EMPOWERMENT CENTER FOR YOUNG ENTERPRISERS INC.

**Current Principal Place of Business:**

921-24TH STREET SOUTH  
ST.PETERSBURG, FL 33712

**Current Mailing Address:**

921-24TH STREET SOUTH  
ST.PETERSBURG, FL 33712 US

**FEI Number:** 45-3236837

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HALL, STELLA  
1751-63RD AVE. SOUTH  
ST.PETERSBURG, FL 33712 US

*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:** ESTELLA HALL

04/24/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, T  
Name WEAVER, CATHERINE  
Address 921-24TH STREET SOUTH  
City-State-Zip: ST.PETERSBURG FL 33712

Title S  
Name WEAVER, CHARLES  
Address 921-24TH STREET SOUTH  
City-State-Zip: ST.PETERSBURG FL 33712

Title D  
Name WEAVER, CATHERINE  
Address 921-24TH STREET SOUTH  
City-State-Zip: ST.PETERSBURG FL 33712

*I hereby 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 all other like empowered.*

**SIGNATURE:** CATHERINE WEAVER

PRESIDENT

04/24/2024

Electronic Signature of Signing Officer/Director Detail

Date