### 2024 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

#### DOCUMENT# P95000043785

Entity Name: EMPOWERMENT CONCEPTS, INC.

# **Current Principal Place of Business:**

11205 S DIXIE HIGHWAY SUITE 201 PINECREST, FL 33156

# **Current Mailing Address:**

11205 S DIXIE HIGHWAY SUITE 201 PINECREST, FL 33156 US

## FEI Number: 65-0706209

## Name and Address of Current Registered Agent:

DEL ROSARIO, JACQUELINE 12300 SW 69TH CT PINECREST, FL 33156 US FILED Feb 20, 2024 Secretary of State 5894189601CC

Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

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	Title	CEO	Title	VP
	Name	DEL ROSARIO, JACQUELINE JDR.	Name	DEL ROSARIO, AARON MR.
	Address	12300 SW 69TH CT	Address	2657 LENOX ROAD NE
	City-State-Zip:	PINECREST FL 33156	City-State-Zip:	UNIT H99 ATLANTA FL 30324
	Title	SEC.	Title Name	С
	Name	DEL ROSARIO, ALEXANDER MR.		TRIMM, DR. CINDY
	Address	1030 NE 36TH AVE		
	City-State-Zip: I	HOMESTEAD FL 33033	Address	242 MEDICAL BLVD
			City-State-Zip:	STOCKBRIDGE GA 30281
	Title	BM		
	Name	JONES, JUDITH MAE		
	Address	12300 SW 69TH CT		
	City-State-Zip:	PINECREST FL 33156		

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.

CEO

Electronic Signature of Signing Officer/Director Detail

Date