# 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L0900000762

Entity Name: EMPIRE UNDERWRITERS, LLC

# **Current Principal Place of Business:**

9654 WEST LINEBAUGH AVE TAMPA, FL 33635

# **Current Mailing Address:**

9654 WEST LINEBAUGH AVE TAMPA, FL 33635 US

# FEI Number: 26-3987078

# Name and Address of Current Registered Agent:

FINLEY, MYRON G 1221 ROGERS STREET SUITE B CLEARWATER, FL 33756 US FILED Jan 10, 2014 Secretary of State CC8436700568

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

# Authorized Person(s) Detail :

| Title           | MGRM                                   | Title           | MGRM                                      |
|-----------------|--|-----------------|---|
| Name            | VARGAS, URANIA                         | Name            | GONZALEZ, ALEX                            |
| Address         | 9654 WEST LINEBAUGH AVE                | Address         | 9654 WEST LINEBAUGH AVE                   |
| City-State-Zip: | TAMPA FL 33635                         | City-State-Zip: | TAMPA FL 33635                            |
|                 |  |                 |   |
|                 |  |                 |   |
| Title           | MGR                                    | Title           | MGRM                                      |
| Title<br>Name   | MGR<br>GONZALEZ, ALEJANDRO             | Title<br>Name   | MGRM<br>LINERO, ROBERT                    |
|                 |  |                 |   |
| Name            | GONZALEZ, ALEJANDRO<br>1246 HOLLY CIR. | Name            | LINERO, ROBERT<br>9654 WEST LINEBAUGH AVE |

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

# SIGNATURE: URANIA VARGAS

MANAGER

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date