

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002532

FILED
Apr 30, 2009
Secretary of State

Entity Name: IMPERIUM DEVELOPMENT, INC.

Current Principal Place of Business:

9000 SHERIDAN STREET PMB 16
PEMBROKE PINES, FL 33024

New Principal Place of Business:

13713 W. SUNRISE BLVD.
205
SUNRISE, FL 33323

Current Mailing Address:

9000 SHERIDAN STREET PMB 16
PEMBROKE PINES, FL 33024

New Mailing Address:

13713 W. SUNRISE BLVD.
205
SUNRISE, FL 33323

FEI Number: 26-1441267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, MARIANO J CPA
8040 NW 155TH STREET SUITE 206
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: MOWITZ, KYLE A
Address: 9000 SHERIDAN STREET PMB 16
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VCSV () Delete
Name: ROBBINS, MARK D
Address: 9000 SHERIDAN STREET PMB 16
City-St-Zip: PEMBROKE PINES, FL 33024

Title: DTVP () Delete
Name: MENDEZ, ANGEL E
Address: 9000 SHERIDAN STREET PMB 16
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: MOWITZ, KYLE A
Address: 13713 W. SUNRISE BLVD., SUITE 205
City-St-Zip: SUNRISE, FL 33323

Title: VCSV (X) Change () Addition
Name: ROBBINS, MARK D
Address: 13713 W. SUNRISE BLVD., SUITE 205
City-St-Zip: SUNRISE, FL 33323

Title: DTVP (X) Change () Addition
Name: MENDEZ, ANGEL E
Address: 13713 W. SUNRISE BLVD., SUITE 205
City-St-Zip: SUNRISE, FL 33323

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARK D. ROBBINS

VCSV

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date