

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K24646

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: IMPEL AMERICA PACKING AND APPLIANCES, CORP.

**Current Principal Place of Business:**

5461 NW 72 AVE  
MIAMI, FL 33166

**New Principal Place of Business:**

6924 NW 72 AVE  
MIAMI, FL 33166

**Current Mailing Address:**

5461 NW 72 AVE  
MIAMI, FL 33166

**New Mailing Address:**

6924 NW 72 AVE  
MIAMI, FL 33166

FEI Number: 65-0057247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARULANDA, HECTOR V.  
14044 SW 104 TERRACE  
MIAMI, FL 33186 US

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

MARULANDA, HECTOR V.  
8487 NW 191 STREET  
MIAMI, FL 33015 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/13/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MARULANDA, HECTOR V.  
Address: 8487 N.W. 191 STREET  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: MARULANDA, MARIA L.  
Address: 8487 N.W. 191 STREET  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MARULANDA, HECTOR V.  
Address: 8487 N.W. 191 STREET  
City-St-Zip: MIAMI, FL 33015

Title: D (X) Change ( ) Addition  
Name: MARULANDA, MARIA L.  
Address: 8487 N.W. 191 STREET  
City-St-Zip: MIAMI, FL 33015

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: MARIA L. MARULANDA

Electronic Signature of Signing Officer or Director

V-PR

04/13/2009

Date