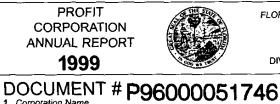
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90076 002 ***150.00

IMAGIK INTERNATIONAL CORPORATION	,
	L SERVICE VILLE AND

Principal Place of Business Mailing Address		i raditabl ein iblia dieft doin main done deine beid neut indii anna deir ibn:					
073 NW 167 S		6073 NW 167 ST					
0/3 NW 16/ 5 3 18	u .	· C 18			1		
IIAMI FL 33015			DO NOT WRITE IN TH	IS SPACE			
					3. Date Incorporated or Qualifed 06/18/1996		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0589323		Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional
22 27						Required	
City & State City & State			6. Election Campaign Financing	-	00 May Be		
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current year I	_	⊡ K₀
24	25	[29] [30]			Personal Property Tax. 10. Name and Address of New Registere	Yes	
	9. Name and Address of Curr	ent Registered Agent		81 Name	To, Name and Address of New Registere	u Agein	
SCH	AMY, GEORGE		ĺ	- , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	N.W. 166TH ST.		ſ	82 Street Add	Iress (P.O. Box Number is Not Acceptable)		
	11 LAKES FL 33016		ŀ	83			
***************************************			ļ				
	. 1	:		84 City	F	L	ip Code
11. Pursuant	t to the provisions of Sections 607 0	502 and 607.1508, Florida Statutes,	the ab	ove-named corp	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing	its registered
office or agent. I a	am familiar with, and accept the arm	nations of Section 607,0505, Florida *	Stati	by the corporat	on's goard of directors, I hereby accept the app	ontiment as	registereu
SIGNATURE	printed name of registered a	Contract Contraction	ristered .	Agent signature requir	ed when reinstaling)	- 1 →	
12.		AND DIRECTORS	13.	-gark signature requir	ADDITIONS/CHANGES TO OFFICERS	AND DIREC	TORS IN 12
		☐ DELETE	1.1 TIT	LE		Chan	
NAME	SCHAMY, GEORGE		1.2 NA	ME			
	8011 N.W. 166TH ST.		1.3 ST	REET ADDRESS			
CITY-ST-ZIP	MIAMI LAKES FL 33016			Y-ST-ZIP			
TITLE	VP	☐ DELETE	2.1 TIT			Chan	ge Addition
NAME	VADILLO, PABLO		2.2 NA	we			
	8011 NW 166TH ST			REET ADDRESS			
CITY-ST-ZIP	MAIMI FL 33016			ry-st-zip			
TITLE	T	☐ DELETE	3.1 TIT			Chan	ge Addition
NAME	FIAT, MONICA		3.2 NA	ĺ			
	8011 NW 166TH ST			REET ADORESS			
CITY-ST-ZIP	MIAMI FL 33016			ry-st-zip			
TITLE	SD	☐ DELETE	4.1 TITI			☐ Chan	ge Addition
NAME	FRAYND, SAUL		4. 2 NA				
	8011 NW 166TH ST			REET ADORESS			
CITY-ST-ZIP	MIAMI FL 33016			Y-ST-ZIP			
TITLE		☐ DELETE	5.1 TITI			☐ Chan	ge Addition
NAME	}	j	5.2 NA	I			
STREET ADDRESS	3		5.3 STI	REET ADDRESS			
CITY-ST-ZIP	j			Y-ST-ZIP			
TITLE	 	☐ DELETE	6.1 TITI			Chan	ge Addition
NAME			6.2 NA	ME			-
			•	REET ADDRESS			
STREET ADDRESS				V- ST-7ID			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report is the and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

305) S12-4567_

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