2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 286669

CANADA, PO

City-St-Zip:

IMPERIAL WOODBURY, INC.

FILED Jan 09, 2006 Secretary of State

Entity Nar	ne: IMPERIA	AL WOODBURY, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
1815 N SU HOLLYWO	IRF RD DOD, FL 330°	9				
Current Mailing Address:			New Mailing Address:			
1815 N SU HOLLYWO	IRF RD OOD, FL 330°	9				
FEI Number:	: 59-1142585	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
326 E HAL	CHURBA S HOLDINGS, LANDALE BE ALE, FL 3300	ACH BLVD				
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	d office or registered agent, or b	oth,
SIGNATUR	RE:					
Election Car		nic Signature of Registered Ac ng Trust Fund Contribution ().	gent		Date	
	S AND DIREC	.,	ADDITION	IS/CHANCE	S TO OFFICERS AND DIREC	TODE
OFFICER	S AND DIREC	TORS.	ADDITION	13/CHANGE	S TO OFFICERS AND DIREC	IOKS.
Title: Name: Address: City-St-Zip:	DECIUTILIS, N 612 SHAKER		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (AARON, CHUF 660 OLEANDE HALLANDALE	ER DR	Title: Name: Address: City-St-Zip:	AARON, CHU 326 E HALLA	(X) Change () Addition JRBA ANDALE BEACH BLVD E, FL 33009	
Title: Name: Address: City-St-Zip:	D (MIKE, DAIAGI 612 OLEANDE HALLANDALE		Title: Name: Address: City-St-Zip:	MIKE, DAIAC 326 E. HALL	(X) Change () Addition GI ANDALE BEACH BLVD E, FL 33009	
Title: Name: Address:	JACQUES, CL) Delete AUDE STREET, HEARST, ONTARIO	Title: Name: Address:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: AARON CHURBA D 01/09/2006