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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 472530

(5)

FILED
Jan 23 1998 8:00am
Secretary of State

1. Corporatio	n Name	(0)				
IMPERI	AL S-P CORP.					
					3 (2011) BIBIN 10810 (1091) BIBIN 1811 8011 BIBIN B	A)
Principal Plac	e of Business	Mailing Address			3 (500) \$10) (08) 1080 1000 1100 1110 \$900 4100 6100 4100 4100 4100 4100	11
790 WEST DA	VIDSON	780 WEST DAVIDSON				
P.O. BOX 1964 P.O. BOX 1964						
BARTOW FL 33830 BARTOW FL 33830					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	į
					03/26/1975	
	Place of Business	2a, Mailing Address			4. FEI Number Applied F	
21		26			59-1631678 Not Appli	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Addition	
22		27			Fee Required	
City & Stat	e	City & State			6. Election Campaign Financing \$5.00 May B	
23		28			Trust Fund Contribution	
Zip	Country	Zip		intry	8. This corporation owes or has paid the current year Intangible	,
24	25	29	30		Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
PA	rtin, david j			81 Name		
780 WEST DAVIDSON				82 Street A	ddress (P.O. Box Number is Not Acceptable)	
BAI	RTOW FL 33830					
				83		
				84 City	85 Zip Code	
					FL '	ļ
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Sta	tutes, the a	bove-named c	corporation submits this statement for the purpose of changing its regist cration's board of directors. I hereby accept the appointment as registe	tered
office or r	egistered agent, or both, in the State im familiar with, and accept the obliga	ot Florida. Such change wa ations of Section 607.0505.	is authorize Florida Sta	d by the corpo tutes	pration's board of directors. I hereby accept the appointment as registe	red
	arrange was, and doops the cong.	and 0, 000 mm out 10000,	riones ols			
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (N	IÒTE: Registere	d Agent signature re	equired when reinstating) DATE	— <u> </u>
12.	OFFICERS ANI	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
TITLE	P	DELETE	11Π	TLE	Change A	ddition
NAME	PARTIN, DAVID J		1.2 N	AME		1
STREET ADDRESS	780 W DAVIDSON ST		1.3 \$	TREET ADDRESS		- 13
CITY-ST-ZIP	BARTOW FL			TY-ST-ZIP		
TITLE	V	DELETE	21 T		Change As	ddition
NAME	SIKES, EDWARD E	_ ·	2.2 N	AME	_ · · _	Į
STREET ADDRESS	780 W DAVIDSON ST		- 1	TREET ADDRESS		1
CITY-ST-ZIP	BARTOW FL		- 1	ITY-ST-ZIP	-	
TITLE	DAITION & C	DELETE	3111		_ Change _ A	ddition
			1			
NAME			3.2 N	··-		
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP		DOLDER.		ITY-ST-ZIP		ul al'al
TITLE		☐ DELETE	4.1 TI	_	Change L Ac	ddition
NAME			4.2 N			
STREET ADDRESS			4.3 S	TREET ADDRESS		
CITY - ST-ZIP			44 C	ITY-ST-ZIP		
TITLE		☐ DELETE	5.1 Ti	TLE	Change L. Ac	idition
NAME			5.2 N	AME		
STREET ADDRESS			5.3 S	FREET ADDRESS		
CITY - ST - ZIP				ITY-ST-ZIP		
TITLE		DELETE	6.1 TI		Change A	ddition
NAME			6.2 N	ſ	- · —	
STREET ADDRESS				TREET ADDRESS		
				1		
CITY-ST-ZIP	pertify that the information supplied w	ith this filling does not qualifi		TY-ST-ZIP emption stated	in Section 119.07(3)(i). Florida Statutes. I further certify that the information	ation
indicated	on this annual report or supplied w	I appual report is true and a	ccurate an	d that my sign	i in Section 119.07(3)(i), Florida Statutes. I further certify that the informature shall have the same legal effect as if made under oath; that I am	an

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 or supplemental annual report is true 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 emparaged to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed. An an attachment with an address.

SIGNATURE:

Severa El Didas El

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(8131-152-2448