FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

t	1996			ary of State CORPORATIONS			
1. Corporation	on Name	564156	(8)				
IMPS	CORPORATION						
Principal Plan	ce of Business		-17				
3111 S.W.			ailing Address		i general niten danit felbit tifft fift	na arer arbit Gibit Öföll El	ien: erêst êlêlî 1881
PO BOX 33			9111 S.W. 27TH AVE. PO BOX 330106 COCONUT GROVE FL 3	13133			
					3. Date incorporated or Qualified 12/01/1977	3a. Date of Last 05/01/1	•
2. Principal F	Place of Business	2a.	Mailing Address		4. FEI Number	00/01/1	Applied For
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.		59-1819138	60.	Not Applicable
City & Stat	to .	27			5. Certificate of Status Desired		75 Additional e Required
23		28	City & State		Election Campaign Financing Trust Fund Contribution	□ \$5.	00 Мау Ве
Zip 24 .	Count 25	·	Ζιρ	Country	8. This corporation has liability for	intangible tax under	s 199.032,
		29 ess of Current Regist	ered Agent	30	Florida Statutes 🔀 Yes	: □No	
				81 Name	10. Name and Address of New R	registered Agent	
CORPO	RATION COMPANY	OF MIAMI		82 Street Add	dress (P.O. Box Number is Not Acceptab	nla)	
	E. FIRST NATIONAL L 33131	BANK BLDG		83	- TOT NOCOPIUD		
WILL ANTI T	L 33131			83			
				84 City		FL 85 2	Zip Code
familiar wi	red agent, or both, in the ith, and accept the obliga	State of Florida, Such attions of Spotion 607.0	change was authorized	by the corporation's bo	pration submits this statement for the pur	pose of changing its	registered office
SIGNATURE				, , , , , , , , , , , , , , , , , , , ,	а о споскога. Погору ассерт тө арда	ointment as registere	d agent. I am
SIGNATURE .	Signature, typed or printed name		plicable (NOTE	Registered Agent signature requir	ed when reinstating:	DATE DATE	d agent. I am
SIGNATURE . 12. THE	Signature, typed or printed name	of registered agent and title if ap DEFICERS AND DIRECT	plicable (NOTE	Registered Agent signature requir	а о споскога. Погору ассерт тө арда	DATE DATE	ORS IN 12
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SIGNATURE . 12. 11LE VAME SHEET ADDRESS DIY-SI-ZP ULE VAME VALUE VALUE	PD DAVIES, GARTH I 3111 S.W. 27TH / COCONUT GROV S GROSS, LOUISE 3720 POINCIANA	of registered agent and title of appointment of the officers and district	pleable (NOTE ORS DELETE	Registered Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE	ed when reinstating:	DATE CERS AND DIRECTI Change	ORS IN 12
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SIGNATURE:

STEINATURE AND TYPED OR PRINTED NAME OF SIGNAL OFFICER OR DIRECTOR

4/17/96 (305) 858-5100