## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR**

DOCUMENT # 1. Entity Name

Principal Place of Business

IMG CENTER

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

OSBORNE, DAVID A JR.

CLEVELAND OH 44114

1360 EAST 9TH STREET, SUITE 100

F01000003440

Mailing Address

IMG CENTER

INTERNATIONAL MANAGEMENT GROUP (IMG), INC.



May 05, 2003 8:00 am § Secretary of State

05-05-2003 90121 043 \*\*\*150.00

1360 EAST 9TH STREET, SUITE 100 CLEVELAND OH 44114		1360 EAST 9TH STREET. SUITE 100 CLEVELAND OH 44114								
2. Principal Place of Business		3. Mailing Address					II <b>51</b> 111 <b>11</b> 111 <b>5</b> 1			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEII	34-1008380	<sup>34-1008380</sup>		Applied For Not Applicable	
Zip	Country	Zip	Countr		5. Cert	5. Certificate of Status Desired		\$8.75 Additional Fee Required		
	6. Name and Address of Current Re			7. Nam	e and Address of New R	egistered A	Agent		]	
				-Name						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			Í	Street Address (P.O. Box Number is Not Acceptable)						1
•	ON FL 33324									
•				City			FL	Zip Code	е	
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										,
FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State						Election Campaign Fir Trust Fund Contributio			<b>0</b> May Be I to Fees	
			11.			ONS/CHANGES TO OFF			S IN 11	]_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD MCCORMACK, MARK H 1360 EAST 9TH STREET, SUITE 10 CLEVELAND OH 44114	□ Delete		T ADDRESS ST-ZIP	12 COM. 1360 E.	- (ADT ADICAL ACK MARK Q+LST. SU). OH 44114	. H re 100	<b>A</b> Change	☐ Addition	CR2E034 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARFAGNA, PETER A 1360 EAST 9TH STREET, SUITE 10 CLEVELAND OH 44114	□ Delete	-	T ADDRESS ST-ZIP			<u></u>	Change	☐ Addition	CR2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LAFAVE, ARTHUR J JR. 1360 EAST 9TH STREET, SUITE 10 CLEVELAND OH 44114	☐ Delete	TITLE NAME STREE	T ADDRESS ST-ZIP				Change	☐ Addition	

12. 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 report or supplemental 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addres with all other like empowered

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

Delete

Delete

Delete

☐ Change

☐ Change

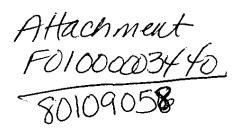
☐ Change

Addition

☐ Addition

Addition





April 24, 2003

**Division of Corporations** Annual Reports Section P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

Re: International Management Group (IMG), Inc.

Document #F01000003440

FEIN: 34-1008380

Enclosed please find the 2003 Uniform Business Report and a check in the amount of \$150.00 in payment of the annual filing fee for the above-referenced taxpayer..

Please acknowledge receipt of the enclosed by stamping the copy of this letter and returning it to us in the envelope provided.

Very truly yours,

Lorraine A. Summers

LAS/jb017 Enclosure

Trunching bin 6 section 18 section 18