

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000005280

Entity Name: IMA, INC.

FILED
Oct 02, 2007
Secretary of State

Current Principal Place of Business:

8810 COMMODITY CIRCLE
SUITE 36
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 691746
ORLANDO, FL 32869

New Mailing Address:

FEI Number: 52-2209547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITTLE, ANDRE
8810 COMMODITY CIRCLE
SUITE 36
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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.

SIGNATURE: ANDRE LITTLE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: LITTLE, ANDRE L
Address: P.O. BOX 691746
City-St-Zip: ORLANDO, FL 328691746

Title: SV () Delete
Name: LITTLE, JACINTA
Address: P.O. BOX 691746
City-St-Zip: ORLANDO, FL 328691746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: ANDRE L. LITTLE

CDP

10/02/2007

Electronic Signature of Signing Officer or Director

Date