

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000363

Entity Name: IMERITI, INC.

FILED  
Feb 12, 2009  
Secretary of State

## Current Principal Place of Business:

445 MARINE VIEW AVE  
STE 130  
DEL MAR, CA 92014

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 1024  
SOLANA BEACH, CA 92075

## New Mailing Address:

445 MARINE VIEW AVE  
STE 130  
DEL MAR, CA 92014

FEI Number: 95-3330555

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOHRMAN, NICCOLE  
3087 N ALAFAYA TRAIL  
ORLANDO, FL 32826 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: STERN, CARL  
Address: 1437 SAN LUCAS CT  
City-St-Zip: SOLANA BEACH, CA 92075

Title: PD ( ) Delete  
Name: STERN, JACOB  
Address: 1437 SAN LUCAS CT  
City-St-Zip: SOLANA BEACH, CA 92075

## 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: JACOB STERN

PD

02/12/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date