

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15778

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: IMPACT IMAGES INTERNATIONAL, INC.

**Current Principal Place of Business:**

2890 GRIFFIN RD.,STE.2  
FT.LAUDERDALE, FL 33312

**New Principal Place of Business:**

**Current Mailing Address:**

2890 GRIFFIN RD.,STE.2  
FT.LAUDERDALE, FL 33312

**New Mailing Address:**

FEI Number: 59-2058258

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DACHELET, THOMAS H  
888 SOUTHEAST 3RD AVENUE  
SUITE 400  
FT. LAUDERDALE, FL 33316 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: P ( ) Delete  
Name: MARCUS, DAVID M  
Address: 2890 GRIFFIN ROAD  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: CFO ( ) Delete  
Name: MARCUS, HAROLD  
Address: 2890 GRIFFIN ROAD  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: S (X) Delete  
Name: MARCUS, RHODA  
Address: 2890 GRIFFIN ROAD  
City-St-Zip: FORT LAUDERDALE, FL 33312

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: DAVID M MARCUS

P

04/16/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date