

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L23377 (9)
1. Corporation Name
IMB HOLDINGS COMPANY



Principal Place of Business C/O HASELTON 1768 GULFSTREAM WAY WEST PALM BEACH FL 33411 US	Mailing Address C/O HASELTON 1768 GULFSTREAM WAY WEST PALM BEACH FL 33411 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 C/O HASELTON Suite, Apt. #, etc. 22 1237 SW BLUE STEM WAY City & State 23 STUART FL. Zip 24 34997	2a. Mailing Address 26 C/O HASELTON Suite, Apt. #, etc. 27 1237 SW BLUE STEM WAY City & State 28 STUART FL. Zip 29 34997	3. Date Incorporated or Qualified 10/13/1989	4. FEI Number 65-0148909	Applied For <input type="checkbox"/> Not Applicable
Country 25 MARTIN	Country 30 MARTIN	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HASELTON, RONALD
1768 GULFSTREAM WAY
W. PALM BEACH FL 33411

81 Name HASELTON RONALD	82 Street Address (P.O. Box Number is Not Acceptable) 1237 SW BLUE STEM WAY	83 STUART	84 City STUART	85 Zip Code FL 34997
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

RONALD HASELTON PRES. *R. Haselton Pres.*

1/12/98

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HASELTON, RONALD 1768 GULFSTREAM WAY W. PALM BEACH FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	DP HASELTON, RONALD 1237 SW BLUE STEM WAY STUART FL 34997
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS CLINTON, CORNELIUS 3019 S.E. DOUBLETEN DR. STUART FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	

14. 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 annual report or supplemental annual 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 its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *R. Haselton Pres.* R. HASELTON PRES. 1/12/98 (588) 223-1328

CR2E034 (10/97)