

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000060303

Entity Name: IMAGE OUTFITTERS, INC.

FILED  
Apr 26, 2007  
Secretary of State

**Current Principal Place of Business:**

15350 SW 83 COURT  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

15350 SW 83 COURT  
MIAMI, FL 33157

**New Mailing Address:**

FEI Number: 65-1019154

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRADFORD, JAMES N JR.  
2100 WEST 76TH STREET STE 211  
HIALEAH, FL 33016 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: PD ( ) Delete  
Name: CARDENAS, ESBERTO  
Address: 15350 SW 83 CT.  
City-St-Zip: MIAMI, FL 33157

Title: VSTD ( ) Delete  
Name: CARDENAS, KIRSTEN  
Address: 15350 SW 83 CT.  
City-St-Zip: MIAMI, FL 33157

**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 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: ESBERTO A. CARDENAS

PD

04/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date