

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000103352

Entity Name: IMART TRADING, INC.

FILED
Oct 23, 2006
Secretary of State

Current Principal Place of Business:

621 SW 64TH PKWY
PEMBROKE PINES, FL 33023

New Principal Place of Business:

Current Mailing Address:

621 SW 64TH PKWY
PEMBROKE PINES, FL 33023

New Mailing Address:

FEI Number: 65-1061326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHAN, MD A
621 SW 64TH PKWY
PEMBROKE PINES, FL 33023 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: MD A KHAN

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: P () Delete
Name: KHAN, MD A
Address: 621 SW 64TH PKWY
City-St-Zip: PEMBROKE PINES, FL 33023

Title: T (X) Delete
Name: AKHTER, TASLIMA
Address: 621 SW 64TH PKWY
City-St-Zip: PEMBROKE PINES, FL 33023

Title: S (X) Delete
Name: KHAN, AFROZA A
Address: 621 SW 64TH PKWY
City-St-Zip: PEMBROKE PINES, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change () Addition
Name: KHAN, MD A
Address: 621 SW 64TH PKWY
City-St-Zip: PEMBROKE PINES, FL 33023

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: MD A KHAN

Electronic Signature of Signing Officer or Director

PDS

10/23/2006

Date