

MAR-23'04 (TUE) 10:51

FISCAL OFFICE

2003-2004

850-245-6015

P.001

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000034442

1. Entity Name

IMAGERY COMMUNICATIONS, INC



FILED

04 MAY 21 PM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6555 NW 36th St.

3. Mailing Address

6555 NW 36th St.

Suite, Apt. #, etc.

213

Suite, Apt. #, etc.

213

City & State
MIAMI, FLCity & State
MIAMI, FL

4. FEI Number

651094080

Applied For

Not Applied

Zip 33166

Country USA

Zip 33166

Country USA

5. Certificate of Status Doc-req

☐ \$8.75 Additional
Fee RequiredREINSTATEMENT 02-04
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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name JUAN CARLOS OROZCO

Street Address (P.O. Box Number is Not Acceptable)

6555 NW 36th Street

Suite 213

City Miami

FL

Zip Code 33166

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Juan Carlos Orozco

MARCH 23/2004

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

(NOTE: Registered Agent designation is subject to annual re-appointment)

DATE

Fees: January 1 to May 31, Fee is \$150.00

From May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Checks Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE President
NAME JUAN CARLOS OROZCO
STREET ADDRESS 6555 NW 36th Street
CITY-STATE-ZIP MIAMI, FL 33166

TITLE NAME
STREET ADDRESS 900016651589
CITY-STATE-ZIP 05/27/04--01087--008 **150.00

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE NAME
STREET ADDRESS 03/28/03 61040 003 \$300.00
CITY-STATE-ZIP 04/22/03 01029 001 \$15.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption status in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 of this report attachment with an address, with all other like empowered.

SIGNATURE:

JUAN CARLOS OROZCO

(305) 871-5003 Phone

MARCH 23/2004 (305) 871-5004 Fax

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 14, 2003 Miami, Florida

Attn: Ms. Pat Bailey
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Debit Memo #: 25560-H

Dear Ms. Bailey,

According to the recent letter you request us to remit a cashier's check or money order in the amount of \$15.00 to cover oversight fee.

Also I started the corporation more than a year ago with little capital and great expectations unfortunately the check I sent for last year renewal bounce and I found out just this past week, while I was revising some paperwork for this year.

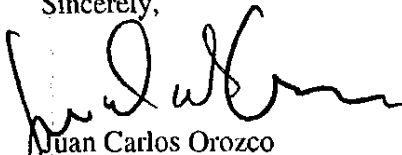
Here I sending a total of \$15,00 to cover this matter, as well I want to thank you very much for your continuo help and understanding of the small businesses.

My regular mailing address is:

Imagery Communications, Inc.
6555 NW 36th Street
Suite 213
Miami, FL 33166

I thank you very much for your support and understanding

Sincerely,



Juan Carlos Orozco
President
Imagery communications, Inc