

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000040810

Entity Name: IMAGING MASTERS INC

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

12914 E. WHEELER ROAD
DOVER, FL 33527

New Principal Place of Business:

Current Mailing Address:

12914 E. WHEELER ROAD
DOVER, FL 33527

New Mailing Address:

FEI Number: 02-0586263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAGER, JASON J
12914 E. WHEELER ROAD
DOVER, FL 33527 US

Name and Address of New Registered Agent:

CONFIDENTIAL ACCOUNTING INC
205 WEST SHELL POINT ROAD
RUSKIN, FL 33570 US

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: TEDDI MCGOWAN

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GAGER, JASON J
Address: 12914 E. WHEELER ROAD
City-St-Zip: DOVER, FL 33527

Title: P () Delete
Name: SMITH, NEIL
Address: 12914 EAST WHEELER ROAD
City-St-Zip: DOVER, FL 33527

Title: VP (X) Delete
Name: GAGER, TIMOTHY
Address: 3420 S. FORBES RD.
City-St-Zip: DOVER, FL 33527

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, NEIL
Address: 12914 E. WHEELER ROAD
City-St-Zip: DOVER, FL 33527

Title: VP (X) Change () Addition
Name: GAGER, TIMOTHY
Address: 3420 S FORBES ROAD
City-St-Zip: DOVER, FL 33527

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

I hereby certify that the information supplied with this filing does not qualify 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: NEIL SMITH

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date