2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000074881

BRISTOW, VA 20136

City-St-Zip:

FILED Jan 29, 2009 Secretary of State

Entity Name: IMAQUE IMAGING INC. **Current Principal Place of Business: New Principal Place of Business:** 11255 PINE FOREST DR NEW PORT RICHEY, FL 34654 LIS **Current Mailing Address: New Mailing Address:** P.O. BOX 1858 NEW PORT RICHEY, FL 34656 FEI Number: 55-0786897 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, JERRY E MR 11255 PINE FOREST DR NEW PORT RICHEY, FL 34654 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SMITH, JERRY E MR Name: Name: 11255 PINE FOREST DR. Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip: Title: VD Title: (X) Change () Addition () Delete Name: GAFFARI, BEN Name: GAFFARI, BEN 9797 RUNNERSTONE PLACE Address: 58 LEWIS WILLIAMS LANE Address:

City-St-Zip:

BERRYVILLE, VA 22611

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: JERRY E. SMITH PD 01/29/2009