2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000106432



FILED Feb 24, 2003 8:00 am Secretary of State

1. Entity Ne	IMAGES, INC.		102			02-24-2003 90937 024 ***158.75				
Principal Place of Business 11031 SW 161ST ST. MIAMI FL 33157				Address W 161ST ST. L 33157			1 183 (1 83) 217 28 (18 2 21 8) 1 28 (11) 38 (11) 38 (11) 38 (11) 38 (11)		. (11 (10)	
2. Principal	Place of Busi	ness	3. Mailin	g Address	-					
Suite, Apt. #, etc. Suite, Apt. #, etc.							☐ CHECK HERE IF MAKING	CHANGES	3	
City & Sta	ate		City &	State		- -	4. FEI Number Applied For			
Zip		Country	Zip		Country		5. Certificate of Status Desired	8.75 Ad	ot Applicable	
	6. Name	and Address of Curren	Registered A	Agent	1	7	7. Name and Address of New Registered Ag	ee Require	ed	
					Name	<u>'</u>	T. Name and Address of New Registered Ag	ent		
DURKIN, 11031 SV				Street Addr	Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FL 33157										
					City			Zip Cod	 le	
8. The above	e named entity	v submits this statement for	or the purpose	of changing its	registered office or re-		agent, or both, in the State of Florida. I am far			
the obliga	ations of regist	ered agent.	or the purpose	or onanging its	registered office of reg	gistered	agent, or both, in the State of Florida. I am far	niliar with,	and accept	
SIGNATURE										
SIGNATURE	Signature, typed	or printed name of registered agent	and title if applicat	ole. (NOTE	Registered Agent signature re	equired wha	en reinstating) DATE			
F	ILE NOW!!	! FEE IS \$150.00					Brit.			
Afte	r May 1, 200	3 Fee will be \$550.00 Florida Department o	f State				9. Election Campaign Financing Trust Fund Contribution.		0 May Be to Fees	
10.	OFFICERS AND DIRECTORS 1							IDEOTOR	2.11.44	
TITLE	D Delete				TITLE		· · · · · · · · · · · · · · · · · · ·	Change		
NAME	DURKIN, G				NAME			_ change	☐ Addition	
STREET ADDRESS 11031 SW 161ST ST. CITY-ST-ZIP MIAMI FL 33157					STREET ADDRESS					
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ITY-ST-ZIP					CITY-ST-ZIP					
2. I hereby co	ertify that the i	information supplied with or supplemental report is	this filing does	s not qualify for t		Section	n 119.07(3)(i), Florida Statutes. I further certify	hat the inf	ormation	

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 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #