2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000113918

Entity Name: IMSTIQUE INCORPORATED

FILED Mar 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

305 SWAIN BLVD

GREENACRES, FL 33463 US

Current Mailing Address: New Mailing Address:

4442 STONEMEADOW DRIVE 19005 MAJESTIC STREET ORLANDO, FL 32826 US 0RLANDO, FL 32833 US

FEI Number: 02-0648622 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:

DIXON, NORDENE E

4442 STONEMEADOW DRIVE

ORLANDO, FL 32826 US

DIXON, NORDENE E

19005 MAJESTIC STREET

ORLANDO, FL 32833 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: NORDENE E DIXON 03/15/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 DIXON, NORDENE E
 Name:
 DIXON, NORDENE E

 Address:
 4442 STONEMEADOW DRIVE
 Address:
 19005 MAJESTIC STREET

 City-St-Zip:
 ORLANDO, FL 32826
 City-St-Zip:
 ORLANDO, FL 32833

Title: S () Delete Title: () Change () Addition
Name: HO-HING SHAWN D Name:

 Name:
 HO-HING, SHAWN D
 Name:

 Address:
 305 SWAIN BLVD
 Address:

 City-St-Zip:
 GREENACRES, FL 33463
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

Name:DIXON, DONOVAN AName:DIXON, DONOVAN AAddress:4442 STONEMEADOW DRAddress:19005 MAJESTIC STREETCity-St-Zip:ORLANDO, FL 32826City-St-Zip:ORLANDO, FL 32833

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: NORDENE E DIXON P 03/15/2008