

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000092046

1. Entity Name
IMANI K GROUP, INC.



Principal Place of Business
**1525 S. 24TH COURT
HOLLYWOOD, FL 33020**

Mailing Address
**1525 S. 24TH COURT
HOLLYWOOD, FL 33020**



03062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0101477	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**FERGESON, HAROLD
1525 S. 24TH COURT
HOLLYWOOD, FL 33020**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when remitting) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	FERGUSON, HAROLD
STREET ADDRESS	1525 S. 24TH COURT
CITY - ST - ZIP	HOLLYWOOD, FL 33020
TITLE	P
NAME	BOWIE, ZACHARY
STREET ADDRESS	3305 NW 213 TER.
CITY - ST - ZIP	CAROL CITY, FL 33056
TITLE	V
NAME	CLIFFORD, HARVEY
STREET ADDRESS	2414 WILEY CT.
CITY - ST - ZIP	HOLLYWOOD, FL 33023
TITLE	S
NAME	DALE HOLLIS, PAMELA
STREET ADDRESS	3910 SW 25TH ST
CITY - ST - ZIP	HOLLYWOOD, FL 33023
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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03/24/05-80045-017 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Pamela Dale Hollis Pamela Dale Hollis 3/15/05 954-964-2901

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #